BN361
Benefit Enrollment and Maintenance

Instructor Led Training

Welcome to Cardinal Training

This training provides participants with the skills and information necessary to use Cardinal and is not intended to replace existing Commonwealth and/or agency policies.

The following HCM training materials are located on the Cardinal website (www.cardinalproject.virginia.gov) under Training:

- Job Aids on topics across all functional areas

- Functional process and instructional videos

The Cardinal HCM Reports Catalog is located on the Cardinal website under Resources.

This course and all other Cardinal HCM training courses are available on the Cardinal Training Management System.
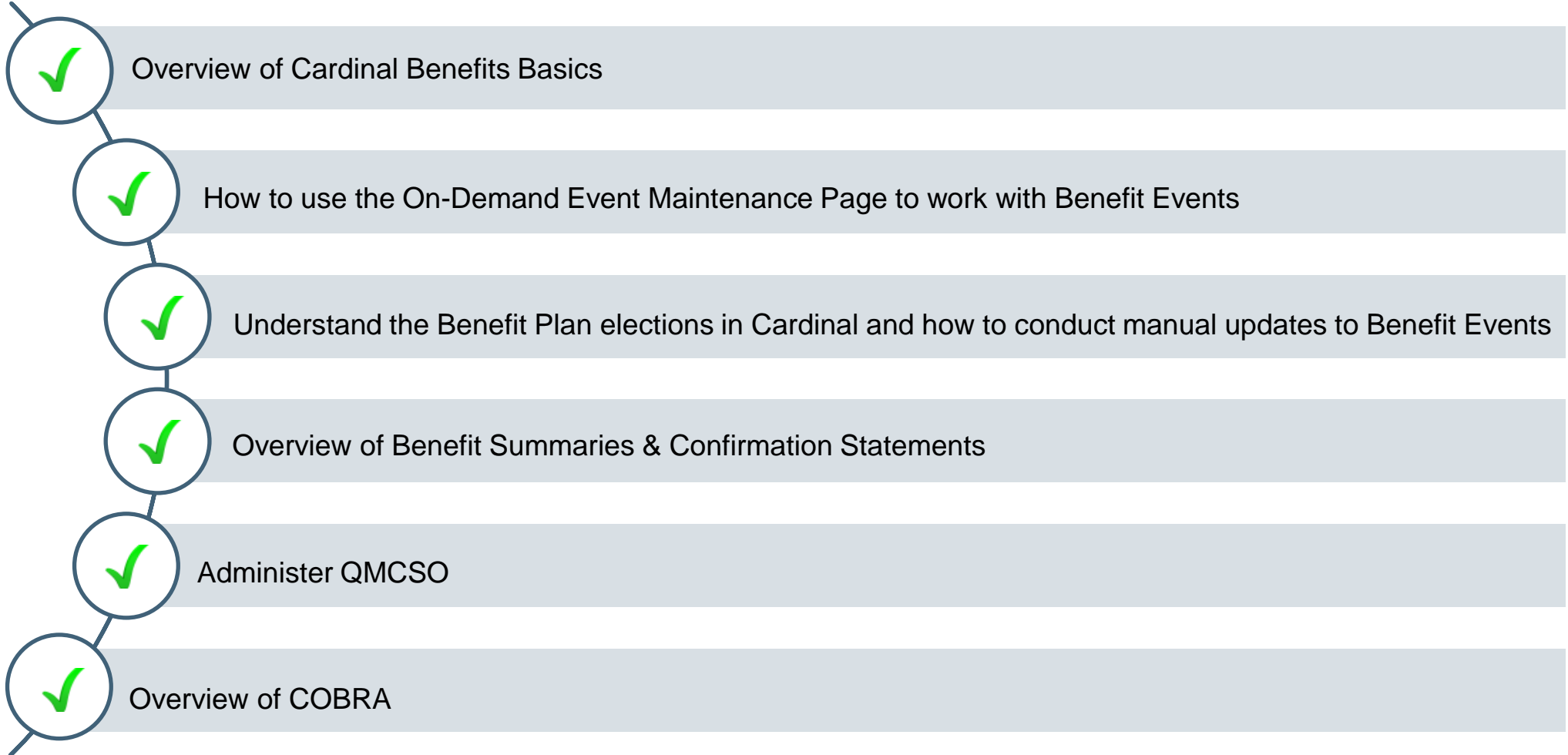
The system screenshots included in the Cardinal HCM training courses show system pages and processes that some users may not have access to due to security roles and/or how specific responsibilities relate to the overall transaction or process being discussed.

- For a list of available roles and descriptions, see the Statewide Cardinal Security Handbook on the Cardinal website in the Security section under Resources.

Course Objectives

After completing this course, you will be able to:

✓ Overview of Cardinal Benefits Basics

✓ How to use the On-Demand Event Maintenance Page to work with Benefit Events

✓ Understand the Benefit Plan elections in Cardinal and how to conduct manual updates to Benefit Events

✓ Overview of Benefit Summaries & Confirmation Statements

✓ Administer QMCSO

✓ Overview of COBRA

Course Objectives (continued)

✓ Track and Manage Benefits Reconciliations

✓ Administer ACA Reporting

Agenda

1	Cardinal Benefit Basics
2	On-Demand Event Maintenance Page
3	Benefit Plan Elections
4	Benefit Summaries & Confirmation Statements
5	QMCSO Administration
6	Overview of COBRA

Agenda

7	Benefits Reconciliation

8	ACA Administration

Lesson

1	Cardinal Benefit Basics

This lesson covers the following topics:

- Cardinal Integration Overview

- Benefits Administration Overview

- Benefit Administration Reports Overview

Cardinal HCM Responsibilities and Relationships

In Cardinal HCM, HR Administrators, BN Administrators, TL Administrators, Payroll Administrators and State Payroll Operations (SPO) work together so that all employees are paid on time and accurately.

State Payroll Operations (SPO)

- Defines Operations Calendar
- Runs Payroll Processes
- Runs Year End Processes
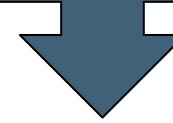
Human Resources (HR)

- Position
- Person
- Job

+

Benefits (BN)

- Medical
- FSA
- Retirement
- TPA (TIAA, FBMC, ICMA-RC)

+

Time & Attendance (TA)

- Time
- Absences
- Approval

+

Payroll (PY)

- Earnings
- Deductions
- Taxes
- Review Paychecks

=

Accurate Paycheck

Benefits Administration Overview

The **Benefits Administration** functional area includes all processes and sub-processes required for maintaining benefits for the organization's employees and their dependents.

The Benefits Administration processes and sub-processes are:

- **Administer Event Maintenance**
  - Maintain Enrollments:
    - System Generated Benefit Events
    - Forms Life Events
    - Qualified Medical Court Support Orders (QMCSO)
    - Retirement
    - Deferred Compensation
    - Annuity

- **Administer Open Enrollment**

- **Administer COBRA**

- **Benefits Reconciliation**
  - Health Reconciliation
  - VRS Billing Reconciliation

- **ACA Reporting**

Benefit Administrator Tile

Use the **Benefits Administrator** tile to manage an employee's benefits enrollment(s):

Maintain Certifications

Navigation: **Benefits Administrator Tile > Employee/Dependent Information > Maintain Certifications**

BAs continue to maintain certifications for disabled dependents, which are still re-certified every 2 years.

Note: The **Maintain Certifications** option under **Employee/Dependent Information** is used to track disabled dependents.

Benefit Program Overview

PROGRAM	WAGE	RETIREE	SALARY Part-Time	**SALARY**	SALARY No Benefit	LODA	TLC

PLAN TYPE	FLEXIBLE SPENDING	RETIREMENT	**HEALTH**	DEFERRED COMPENSATION	ANNUITY

PLAN	**COVA CARE BASIC**	KAISER

COVERAGE CODE	**SINGLE**	**EMPLOYEE + SPOUSE**	**EMPLOYEE + CHILD**	**FAMILY**
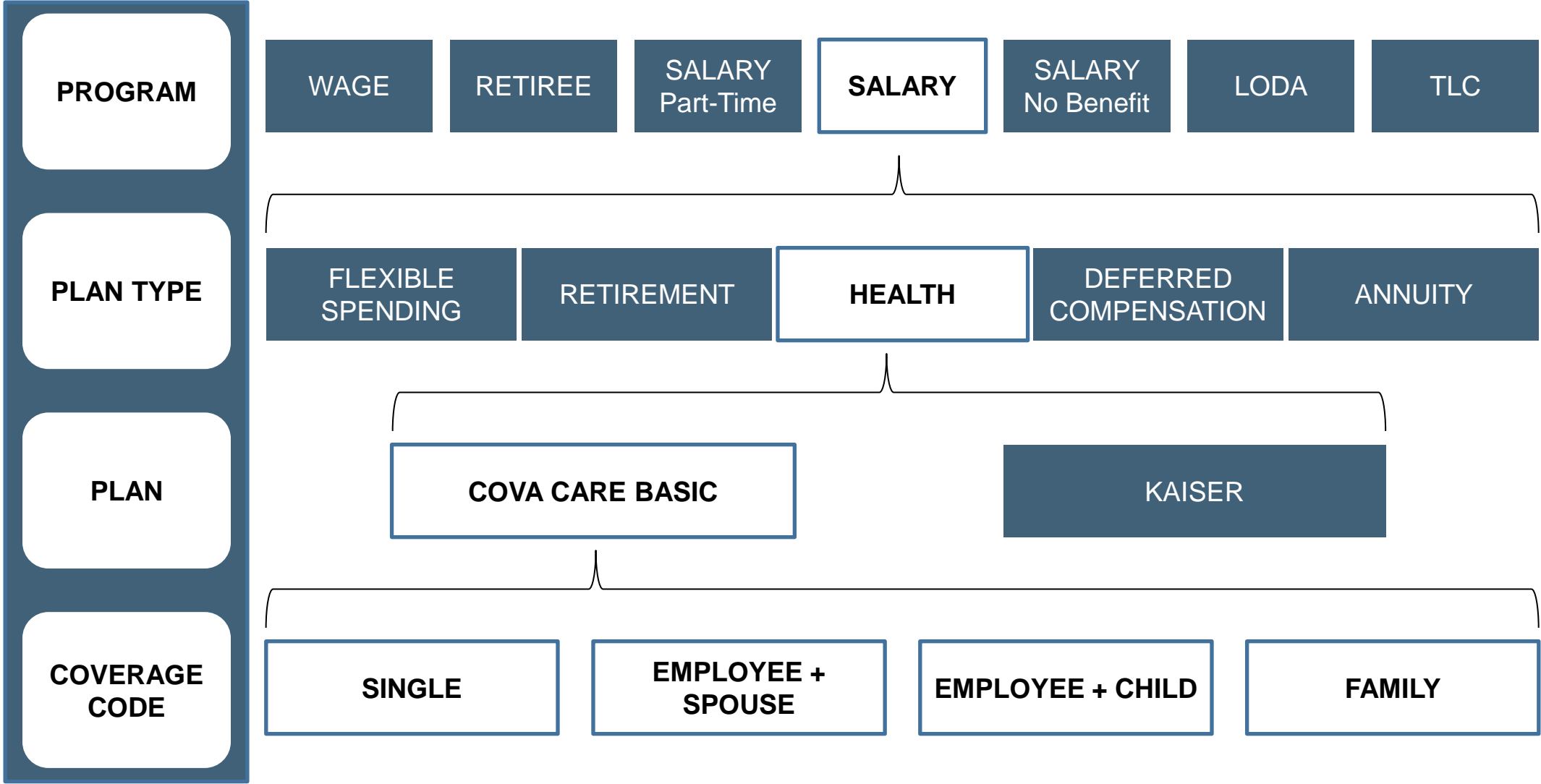
Note: For further information and a complete list of benefits plans, refer to the Job Aid titled **BN361 Quick Reference Guide**. This Job Aid can be found on the Cardinal website in **Job Aids** under **Training**.

Benefit Events Overview

Benefit Events evaluate or reevaluate an employee's benefit eligibility and provide the employee with the opportunity to update their enrollment, if appropriate. All benefit enrollments or changes are made through a Benefit Event.

- **Benefit events are**:
  - Triggered by entry of qualifying personal and/or job data changes by HR Administrator
  - Entered manually by Agency Benefits Administrator (BA) triggered from employee-submitted form
  - Generated automatically via qualifying Employee Self-Service (ESS) entry by employee

- **Life Events**:
  - Initiated by changes through ESS for birth, adoption, marriage, and divorce Life Events
  - Agency BA reviews documentation and reverses enrollment if event not supported
  - Initiated by Agency BA after employee requests changes and provides documentation

- **Examples of Benefit Events include**:
  - Hire Event
  - Qualifying Life Event (e.g., Birth Event, Adoption Event, Marriage Event, Divorce Event)
  - Leave of Absence (LOA) Event

Only one benefit event can be open at any time. It is extremely important that open events are monitored and processed as soon as possible.

Note: For further information on Benefit Events and the Benefit Enrollment process, refer to the Job Aid titled **BN361 Enrollment Steps for an Employee**. This Job Aid can be found on the Cardinal website in **Job Aids** under **Training**.

Lifecycle of an Event

1 Personal or job data changes create a Benefit Event

2 Benefits eligibility evaluated by Cardinal

3 Benefit events which require enrollment are open for entry (if applicable)*

4 Benefit changes are made by Agency BA or employee

5 System and Agency BA validate benefit changes as applicable

6 Elections sent to plan vendors via interface and confirmation statements are available to participants

*Most job changes invoke a Benefit Event to be evaluated by Benefit Administration, but many are immediately closed because no benefits eligibility change exists (e.g., supervisor change)

Benefits Eligibility

Cardinal HR maintains effective-dated enrollment history for each applicable employee. Cardinal Benefits Administrator evaluates when changes occur to employee personal or job data. Changes that could potentially impact benefits include the following:

```
                        ┌──────────┐
                        │ Cardinal │
                        │   HR     │
                        └──────────┘
```

JOB DATA	PERSONAL DATA
• Action / Reason • Employee Class • Part / Full / Quasi Status • Pay Frequency • Work Location • Elig Config Fields	• Date of Birth • Gender • Marital Status • Address (Zip Code)
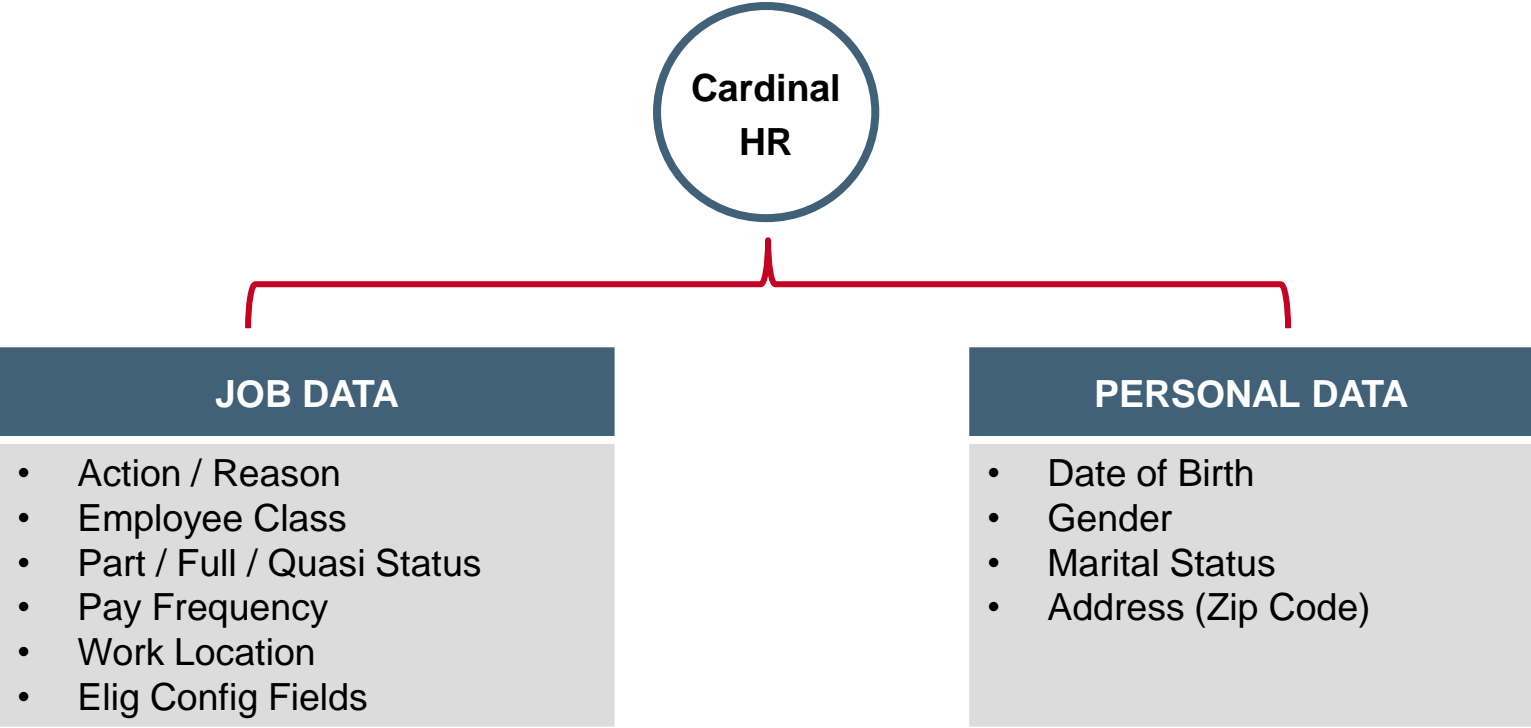
Note: Agencies must maintain a minimum amount of position and job data for HR Level 3 employees in Cardinal to process benefit enrollments. For further information on Eligibility Configuration Fields, see the Job Aid titled **BN361 Overview of the Eligibility Configuration Fields.** This Job Aid can be found on the Cardinal Website in **Job Aids** under **Training**.

Benefits Basic Concepts

Benefit Enrollment Date:

The Benefits functional area contains multiple fields related to effective dating. The following table displays the key date-related fields used in processing:

Benefit Enrollment Field	Definition
DEDUCTION BEGIN DATE	The date the deduction begins for the employee.
COVERAGE BEGIN DATE	The date the coverage starts.
ELECTION DATE	The date the employee elects their benefits. This is typically the date the coverage changes are entered into the system.

Benefit Enrollment Date Example:
- An employee got married on 1/15
- The employee elected to add their spouse as a dependent on 1/17
- The employee's spouse's coverage begins on the first day of the month following marriage (2/1)

- **DEDUCTION BEGIN DATE** = 2/1
- **COVERAGE BEGIN DATE** = 2/1
- **ELECTION DATE** = 1/17

Benefits Basic Concepts (continued)

Retroactive coverage can be identified by examining the benefit enrollment fields.

Retroactive Coverage Example:
- An employee retires on 1/24.
- The employee's current plan provides coverage through the end of January.
- Virginia Retirement System (VRS) hires the retired employee into the VRS Retiree Business Unit (VRSRT), effective the first day of the following month (2/1).
- The retired employee or Agency BA enters their benefit elections into Cardinal on 2/15.
- Coverage retroactively begins on 2/1.

DEDUCTION BEGIN DATE = 2/1
COVERAGE BEGIN DATE = 2/1
ELECTION DATE = 2/15

Note: For further information on effective dating, refer to the Job Aid titled **HR351 Overview of Effective Dating.** This Job Aid can be found on the Cardinal website in **Job Aids** under **Training**.

Effective Dating

The following diagram defines current, history, and future effective dates:

Life Events: BES Dates vs Cardinal Dates

BES Date	Cardinal Date
Transaction Effect Date	Coverage Begin Date
Event Date	Effective Date
Receive Date	(Should be consistent with) Election Date
Key Date (Entry Date)	Election Date
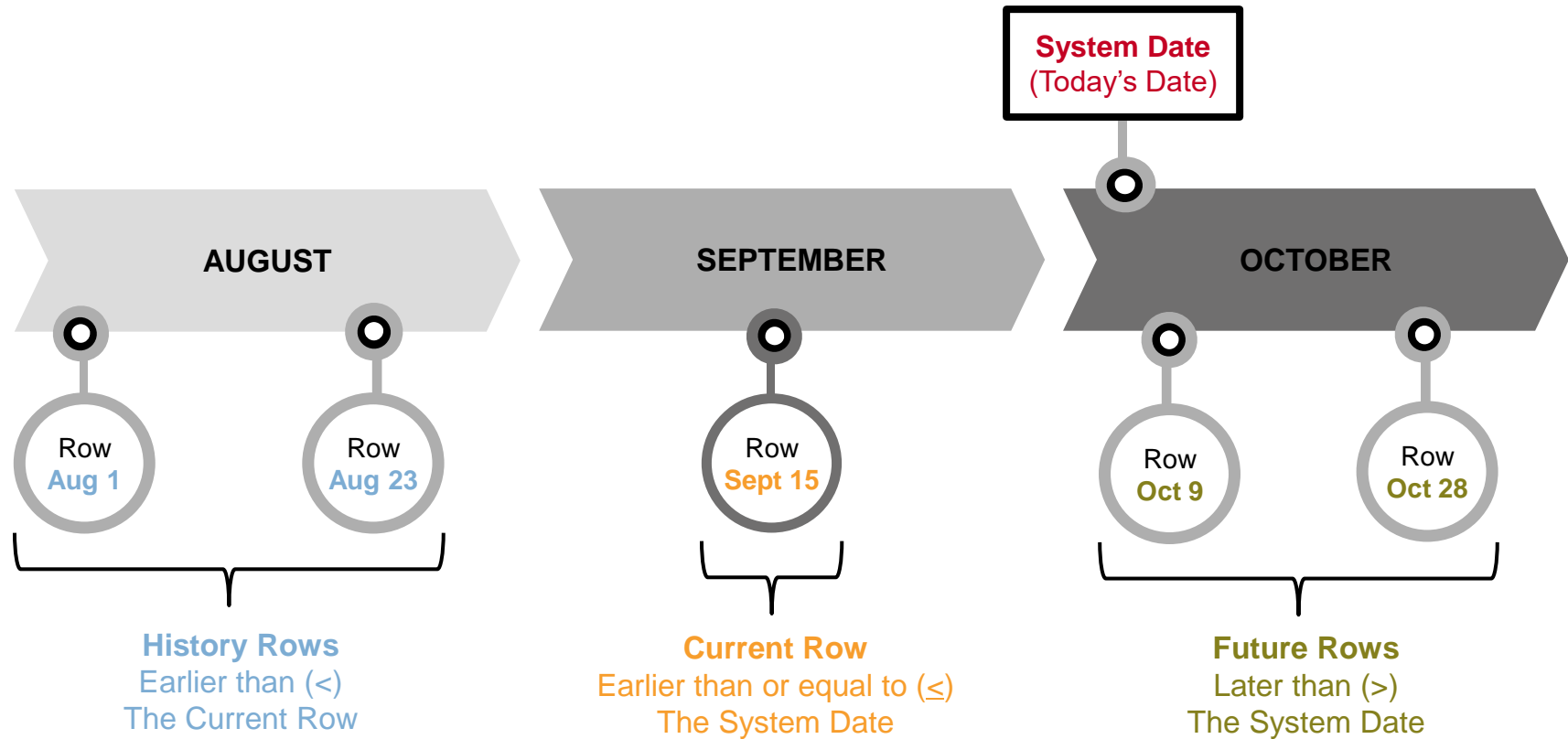
Agency BA Reports/Query Inventory

Work Unit	Work Unit Title	Report Description	Report/Query
RBN301	Dependent Approval Report	Lists employees and associated dependents approaching an age-related milestone that requires health care enrollment changes to remain compliant with policy. Report also identifies outstanding approvals for new dependents and disabled dependents that may need to be re-certified as disabled.	Report
RBN168	COBRA Event Summary Report	Provides data about COBRA beneficiaries at the Event Level. The report will list all employees to whom a COBRA event has occurred. The qualified status will indicate to the user whether the event is Qualified (QL), Not Qualified (NQ), Not qualified/duplicate (ND) or QE (Qualify Error).	Report
RBN009	Defaulted OE Elections Report	Used by agency Benefits Administrators providing a list of employees whose health benefit plan will be defaulted to a new plan because an old plan is no longer offered if no action is taken.	Report
RBN148	ICMA Upload Error Report	Lists employees on the monthly ICMA-RC Upload file whose deferred compensation changes were not loaded to Cardinal. Report includes the applicable error/warning message and enrollment information necessary to allow manual entry into Cardinal.	Report
RBN041	Invalid Benefit Elections	Shows invalid benefit elections, which includes errors, such as coverage over the maximum or under the minimum, invalid choices, failure to meet eligibility requirements, etc.	Report

Notes: For a full list of Benefit Reports and Queries refer to the **Cardinal HCM Reports Catalog** which is located on the Cardinal website under Resources.

Lesson Checkpoint

Now is your opportunity to check your understanding of the course material.

1. From the information below fill in the correct date for the employee's benefit enrollment field:

- An employee got married on **5/05**

- The employee enrolled their spouse in health care through Cardinal Self -Service on **5/20**

    Coverage Effective Date = _____

Lesson Summary

1	Cardinal Benefit Basics

In this lesson, you learned

- An overview of the Cardinal Integration process

- An overview of Benefits Administration

Lesson

| 2 | On-Demand Event Maintenance Page |

This lesson covers the following topics:

- Overview and Walkthrough of the On-Demand Event Maintenance Page:

  - Creating an Event

  - Adding a Manual Event

  - Reviewing an Event

  - Approving a Dependent

  - Reopening an Event

  - Enrolling in Benefits

  - Finalizing an Event

On-Demand Event Maintenance Page

The **On-Demand Event Maintenance** page allows the BA to perform maintenance to currently open and closed Benefits Events.

Navigation: Benefit Administration > Benefits Management > On-Demand Event Maintenance > Empl ID Search

On-Demand Event Maintenance Page Overview

The following chart provides a description of the button on the **On-Demand Event Maintenance** page:

Button	Description
Schedule/Prepare Activity	Initiates the automated programming process that schedules and prepares pending activity
Show Activities	Displays pending activity to be processed
Event Status Update	Allows the BA to revert an event to a previous status for reprocessing purposes
Election Entry	Opens the **Ben Admin Election** pages, where benefit elections are entered
Validate/Finalize	Executes the programming process to validate elections, close the event, and update the Base Benefits Tables
Finalize/Apply Defaults	Force-finalizes a participant's elections and enrolls the participant in default elections, even if the current elections are in error; (Subsequent selection forces the event to close and update Base Benefits)
Reprocess	Reprocesses existing events to update employee's records if automatic events or manual events were retroactively added, reprocesses to correct enrollment errors after an event is finalized, or re-opens an event to make additional elections on behalf of an employee

DEMO

Process Considerations

PeopleSoft Benefits Administration processes all participant Events by using the appropriate Event rule and Event Classification established for each covered Plan Type to evaluate the Event's effect on an employee's benefits eligibility. Each participant Event goes through four steps:

1) Assign Benefit Program
2) Prepare Options
3) Enter Elections
4) Finalize Enrollments

BAs are occasionally required to reprocess an Event to recognize eligibility or enrollment changes. Benefits Administration statuses and their interactions are described below:

- **Event Status**
    - Indicates the status of the event (e.g., Opened, Closed, Voided)

- **Process Indicator**
    - Specifies the current Event stage

- **Event Process Status**
    - Indicates if a step has been completed and displays any processing errors for each completed step

Event Statuses

An Event typically has 3 statuses: Open, Close, or Void. Events must have an Event Status of "Open" to be processed or reprocessed:

Event Status	Description
Open (O)	Cardinal will process on the next run of the Benefits Administration process. Only one event per Employee ID and Benefit Record Number combination can be opened at one time. The Event Status can be updated to Close automatically by Cardinal or manually on the **Event Status Update** page.
Close (C)	Not currently processed by the system. Closed events can be updated to Open, either automatically by Cardinal or manually on the **Event Status Update** page.
Void (V)	Has been backed out of the system and all related eligibility processing has been reversed. Use the **Controls** page or **Event Status Update** page to change the Event Status to Void. Events with an Event Status of Void can be updated to Open or Close through the Event reprocessing steps.

Process Indicator

The Process Indicator tells Cardinal how far back to open the event. Below are the descriptions for each Process Indicator:

Symbol	Name	Description
A	Assign Benefit Program	Cardinal is attempting to reprocess the participant to a "Prepared" status.
E	Elect Options	Cardinal is revalidating elections for the event and resetting the final process to a "Finalized – Enrolled" status.
N	Normal Processing	Cardinal is following standard processing procedures.
P	Prepare Options	Cardinal is re-evaluating the participant's option eligibility and attempting to reprocess the participant to a "Prepared" status.
R	Re-Enter	Cardinal reopens the data entry page to enable election changes, resulting in a "Re-Enter" or "Elections Entered" status.
V	Void	Cardinal is voiding an event. When you void an event, it stays in the status that it was in when it was voided.

Process Status

The Event Process Status indicates if a step has been completed and displays any processing errors for each completed step:

Process Status	Reason
Assign None (AN)	Benefits Administration was unable to assign a benefit program. This could be a result of the Benefit Flag set to a terminated Employee Record.
Assign Error (AE)	Benefits Administration was unable to assign Benefit Program due to missing or incorrect information.
Assigned (AS)	Benefits Administration assigned a Benefit Program because a prior event is Open. It is possible the Open Event is appearing on the MSC Event Evaluation report.
Prepare Error (PE)	Error in preparation of options. The system has encountered an error. This could be a result of a missing ICI ABBR or a missing payroll calendar.
Prepared (PR)	Cardinal calculated eligible options, credits, rates, and proof requirements for the employee associated with the event, and current elections have been identified for proof, eligibility level, and default processing.
Notified (NT)	The employee accessed the Self-Service event but has not submitted elections.
Elections Error (EE)	Cardinal encountered an error while attempting to process the employee's elections. This could be a result of the dependent effective dates, a mismatch between coverage code and listed dependents, or a missing pay calendar.
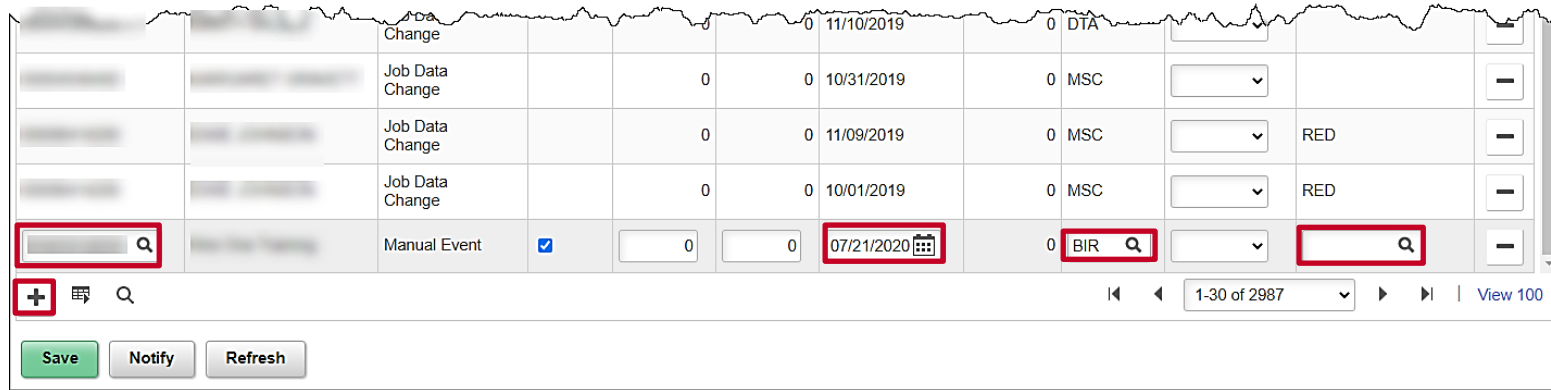
Process Status (continued)

Process Status	Reason
Re-Enter (RE)	BA reopened event
Elections Entered (ET)	BA (or the employee through ESS) entered new elections, which are ready for validation through the Benefits Administration Process.
Finalized – Benefit Pgm None (FA)	Employee event has no program assignment or current elections. This could be a result of the Benefit Flag set to a terminated Empl Rcd. It could also be the result of an address change when employee is not active.
Finalized – Prepare None (FP)	Benefit Administration is acknowledging that the employee's eligibility has not changed.
Finalized – Enrolled (FE)	Benefits Administration processing is complete for the employee event. All elections have been validated and loaded.

Creating a Manual Event Benefit Event

Benefit Events are created in the **Review BAS Activity** page and maintained in the **On-Demand Event Maintenance** page

Navigation: **Benefits Administrator Tile > Benefits Management > Review BAS Activity**

Navigation: **Benefits Administrator Tile > Benefits Management > On-Demand Event Maintenance > Empl ID Search**

Manual Benefit Events

BAS Action	Description	Available in ESS	How is it Created?	COBRA Action
A26	Covered Child Lost Eligibility – Child turns age 26	NO	Manual Event by BA	OVG (CH No Elig)
BIR	Birth or Adoption	YES	Online through Life Events or Manual Event by BA	N/A
DIV	Divorce	YES	Online through Life Events or Manual Event by BA	DIV (Divorce)
DGE	Dependent Gained Eligibility with Employer	NO	Manual Event by BA	N/A
DLE	Dependent Lost Eligibility with Employer	NO	Manual Event by BA	N/A
FSC	Family Status Change – Add dependent to existing family coverage	NO	Manual Event by BA	N/A
HIP	HIPAA Spec Enroll/Loss Coverage	NO	Manual Event by BA	N/A
LEG	Lost Eligibility Government Plan	NO	Manual Event by BA	N/A
LEM	Lost Eligibility Medicare/Medicaid	NO	Manual Event by BA	N/A
MAR	Marriage	YES	Online through Life Events or Manual Event by BA	N/A
MSR	Medical Support Order - Remove	NO	Manual Event by BA	N/A
MSA	Medical Support Order - Add	NO	Manual Event by BA	N/A

Manual Benefit Events (continued)

BAS Action	Description	Available in ESS	How is it Created?	COBRA Action
BEN	Benefits Change – OHB Only	NO	Manual Event by BA	N/A
DCH	Death of Child	NO	Manual Event by BA	N/A
DSP	Death of Spouse	NO	Manual Event by BA	N/A
FSD	Dependent Care Cost/Coverage Chg	NO	Manual Event by BA	N/A
LAT	LOA Benefits Termination – EE on LOA Job Change Elig 9	NO	Manual Event by BA	N/A
FPP	Failure to Pay Premium – BA cancelled due to non-payment	NO	Manual Event by BA	N/A
ADR	Address Change	YES	Personal information change	N/A
OE	Open Enrollment	YES	OHB will open schedule	N/A
ELG	Eligibility Configuration Change	NO	Job Data Change	N/A
GEM	Gain Eligibility Medicare/caid	NO	Manual Event by BA	MED (Medicare)

Benefit Plan Types

Plan Type	Description
10	Medical
23	Imputed Life
46	403(b)
49	Section 457
4W	VRS Hybrid Vol Defined Contribution
60	Flexible Spending Medical
61	Flex Spending Dependent Care
70	Employee Retirement DB
7V	Hybrid Retirement
7W	Group Term Life
7X	Retiree Health Credit
7Y	VSDP LTD
7Z	Hybrid Mandatory DC
AY	Health Premium Reward
AZ	Flex Spending Admin Fee

DEMO

Enrolling in Benefits Demonstration

Medical Coverage Codes:
'1' – Single
'2' – EE + Spouse
'3' – EE + 1 Child
'4' – Family

Enrolling in Benefits Demonstration (continued)

Click the **Change/Add Dependent Data** link to change the **Dependent Beneficiary Type** field for any Dependents and/or Beneficiaries currently on the employee's record.

Within the **Personal Profile** tab, select the appropriate **Dependent Beneficiary Type** using the drop-down list. Scroll between Dependents/Beneficiaries using the arrows.

Make sure that if the proper documentation has been to submitted by the employee, that the Dependent Beneficiary Type has been changed to **Approved Dependent.**

Enrolling in Benefits Demonstration (continued)

After all necessary Dependents and Beneficiaries are added, click the **Enroll All** button to enroll all dependents/beneficiaries or select the **ID Look-Up** icon to add individual dependents/beneficiaries. Click the **Add a New Row** button (**+**) to add additional dependents/beneficiaries.

Plan Type 10 : Medical

Option Code 28 🔍 COVA Care + Prev Dental (ACC0) (Family)

Health Provider ID [_____] ☐ Previously Seen

Special Requirements

Dependents/Beneficiaries

Enroll All

Dependents/Beneficiaries

*ID	Name	Relationship to Employee	Health Provider ID	Previously Seen	Covered Person Type	Age Limit Flag	
01 🔍	▓▓▓▓▓	Child	[_____]	☐	Child	☑	—
+...							

Enrolling in Benefits Demonstration (continued)

Note: Cardinal does **not** automatically waive FSA enrollments when an employee has a Life Event change and waives health benefit coverage

Hands-On Exercise

Now you have an opportunity to practice the lessons learned today in a training environment.

Your instructor will provide direction on how to log in and complete the exercise.

If you have any questions, please ask your instructor.

Finalizing Benefit Event

The **Status** field for the event updates to "**Entered**" after the Benefits are elected. Click the **Validate/Finalize** button to confirm and save the elections to the database.

Note: The system will check through all of the rules regarding dependent eligibility and COVA rules to determine if the transaction and elections are valid. At this point errors could appear after clicking on the **Validate/Finalize** button. Depending on the errors different actions need to be taken. For further information on Troubleshooting Errors see the Job Aid titled **BN361 Benefits Quick Reference Guide.** This Job Aid can be found on the Cardinal Website in **Job Aids** under **Training.**

Finalizing Benefit Event (continued)

The **Event Status** field updates to "**Finalized - Enrolled**"

Note: Events are processed in the order in which they occur when a participant has multiple unfinalized events (i.e., older events are processed before more recent events). If applicable, click on the **Event Status Update** button to view multiple events.

DEMO

Hands-On Exercise

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If you have any questions, please ask your instructor.

Reviewing Benefit Events

This page is used to review the status and processing stage of an event.

Navigation: **Benefits Administrator > Benefits Management > On-Demand Event Maintenance > Empl ID Search**

Reopening Benefit Event Demonstration

The **Process** and **Event Status** fields determine an employee's Benefits Administration status.

Navigation: Benefits Administrator > Benefits Management > On-Demand Event Maintenance > Empl ID Search

To reprocess an event:
1. Navigate to the **On-Demand Event Maintenance.**
2. Search for the Employee by entering their **Empl ID**
3. Click on the **Event Status Update** button
4. On the **Event Status Update** page. Find the correct event.
5. Set the **Process** status to **"Re-Enter"**
6. Set the **Event Status** to "**Open for Processing**".
7. Click the **OK** button to return to the **On-Demand Event Maintenance** page.
8. Click the **Save** button, and then click the **Reprocess** button.
9. Now complete the updated enrollments by clicking on the **Election Entry** button.

DEMO

Hands-On Exercise

Now you have an opportunity to practice the lessons learned today in a training environment.

Your instructor will provide direction on how to log in and complete the exercise.

If you have any questions, please ask your instructor.

Lesson Checkpoint

Now is your opportunity to check your understanding of the course material.

1. Where do you go on the On-Demand Event Maintenance Page to reopen a benefit event?
   A. Prepare Options   B. Event Status Update
   C. Schedule/Prepare Activity   D. Election Entry

2. What would the **status** be on the event for an employee who has already enrolled in benefits through ESS and the Benefit Administration Admin has run?
   A. Finalized/Enrolled   B. Updated
   C. Open   D. Closed

3. What page on the Benefit Administration tile is used to add manual events?
   A. Enroll in Benefits   B. On-Demand Event Maintenance Page
   C. Review Employee Statements   D. Review BAS Activity

Lesson Summary

2	On-Demand Event Maintenance Page

In this lesson, you learned

- How to use the On-Demand Event Maintenance Page when working with Benefit Events in the following capacity:

  - Create Events

  - Adding a Manual Event

  - Review Events

  - Approving a Dependent

  - Enroll in Benefits

  - Reopen Events

  - Finalizing Events

Lesson

| 3 | Benefit Plan Elections |

This lesson covers the following topics:

- Understanding how the following Benefit Plan elections get submitted to Cardinal:

  - Health & FSA elections

  - Premium Reward

  - Retirement Plans

  - Deferred Compensation & Annuity

Health & FSA elections

Employees submit Health Benefit and FSA elections directly through ESS. Alternatively, the Agency BA can submit these elections through the **On-Demand Event Maintenance** page. The information populates in the employee's Base Benefits after elections are finalized.

Navigation: **Navigator > Benefits > Enroll in Benefits**

> Health Benefits

> Spending Account

Review Premium Reward Benefit Elections

Navigation: **Navigator > Benefits > Enroll in Benefits > Simple Benefits**

The Premium Rewards File upload is centrally processed
- Participants are included in the Premium Reward file received by Cardinal if they satisfy the requirements to earn the premium reward.
- The Premium Rewards file is automatically uploaded, and the participant is enrolled in the Simple Benefit plan. An additional pay is established to offset the cost of the medical premium.
- If the Additional Pay needs to be manually updated for an employee, reach out the HR Administrator to make the adjustments necessary.

DEMO

Retirement Process Flow
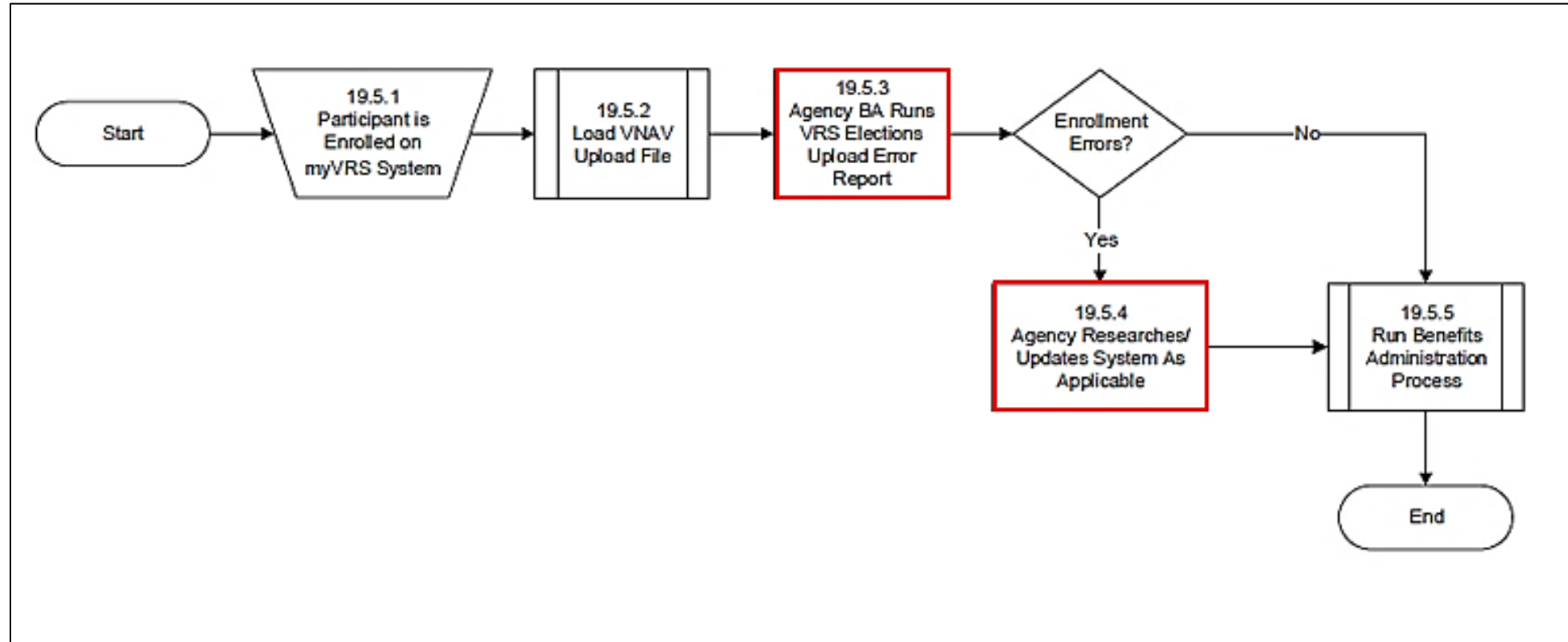
Retirement Plan Enrollment

1. Enrollment for the Participant occurs in myVRS System

2. Load VNAV Upload File
   a. Cardinal automatically uploads file
   b. Updates employee Job Records with respective Action/Action Reasons assigned to upload
   c. Stores Retirement Plan Code in **Eligibility Field 1** on **Benefit Program Participation** page
   d. Stores VRS Organization Code in **Eligibility Field 6** on **Benefit Program Participation** page
   e. Creates Benefits Event when Job Data is updated on individual employee's Job Record
   f. Review Benefits Event information through **On-Demand Event Maintenance** page

3. Agency BA runs VRS Elections Upload Error Report
   a. Reports rejected for errors such as:
      i. Employee record not found
      ii. Employee terminated
      iii. Wage employee not eligible

Note: For further information on troubleshooting Error Reports, see the Job Aid titled **BN361 Benefit Upload Error Reports Troubleshooting**. This Job Aid can be found on the Cardinal Website in **Job Aids** under **Training**.

In addition, for further information on Eligibility Configuration Fields, see the Job Aid titled **BN361 Overview of the Eligibility Configuration Fields.** This Job Aid can be found on the Cardinal Website in **Job Aids** under **Training**.

VRS Elections Upload Error Report

Below is an example of the VRS Elections Upload Error Report:

Retirement Plan Enrollment (continued)

4. Agency researches/updates Cardinal
   a. Research errors and determine appropriate corrective action(s) for every action listed on VRS Elections Upload Error Report
   b. Update **Eligibility Field 1** and **Eligibility Field 6** with correct values (as required) to create Benefits Event and complete enrollment

5. Run Benefits Administration Process
   a. Automated Event Processing Program evaluates events created in Step 4, evaluates employee eligibility, and enrolls employee into correct retirement plan

Note: For more information on employees that opt to retire with an Optional Retirement Plan please refer to the HR351 Separation Statuses Job Aid. This Job Aid can be found on the Cardinal Website in **Job Aids** under **Training**.

Deferred Compensation Process Flow
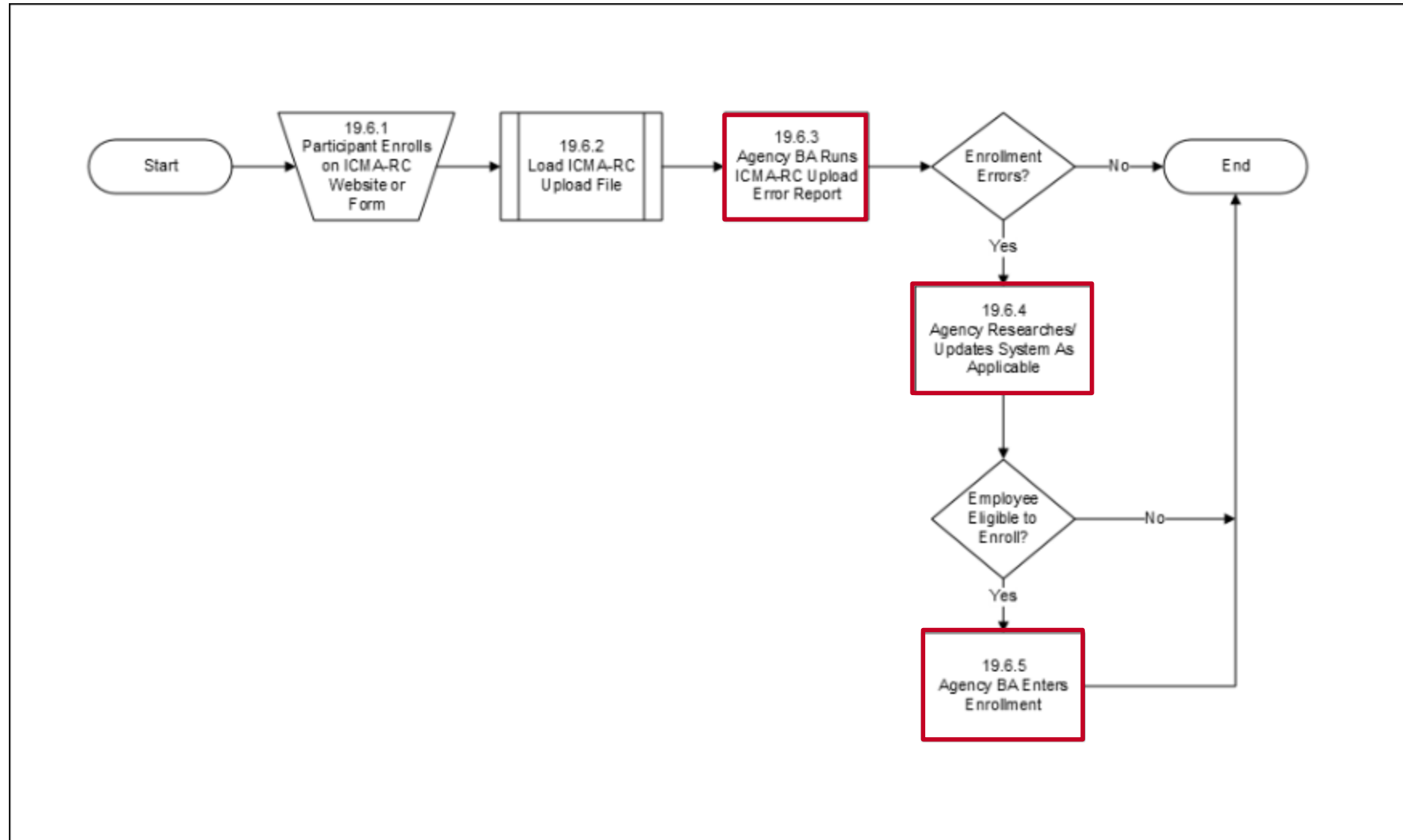
Deferred Compensation Supplement

Cardinal stores employees' deferred compensation plan elections to maintain payroll deductions. The International City Management Association Retirement Corporation (ICMA-RC) is the vendor that manages the deferred compensation supplement system of record. VRS is the state agency responsible for managing COVA's relationship with ICMA-RC.

1. Participant enrolls on ICMA-RC website or form

2. ICMA-RC Upload File is automatically loaded
    a. The upload will evaluate the eligibility for the cash match based upon retirement enrollment
    b. ICMA-RC automatically updates individual employee deferred compensation supplement elections on **Savings Plan Table** on **Cardinal Base Benefits** page

3. Agency BA runs ICMA-RC Upload Error Report
    a. Identifies changes from ICMA-RC Report not successfully updated into Cardinal

4. Agency BA enters enrollment on the **Review BAS Activity** page
    a. Create event (ELG BAS Action) on **Review BAS Activity** page to open enrollment options and enroll employee in Deferred Compensation (Plan Type 49)

ICMA-RC Upload Error Report

Below is an example of an ICMA-RC Upload Error Report:

Annuity Process Flow

Annuity Plans Administration

Annuity plans are administered by the Fringe Benefits Management Company (FBMC). Cardinal stores employees' annuity plan elections to maintain payroll deductions.

1. Participant enrolls via provided methods
   a. Continue current enrollment process
   b. FBMC submits upload file to Cardinal to process changes

2. FBMC Upload File is automatically loaded
   a. The upload will evaluate the eligibility for the cash match based upon retirement enrollment.
   b. Automatically updates annuity elections on **Savings Plan Table** in **Cardinal Base Benefits**

3. Agency BA runs the FBMC Upload Error Report
   a. Identifies changes from FBMC Report not successfully updated into Cardinal

4. Agency BA enters enrollment using the **Review BAS Activity** page
   a. Create event (ELG BAS Action) on **Review BAS Activity** page to open enrollment options and enroll employee in annuity (Plan Type 46)

FBMC Upload Error Report

Below is an example of an FBMC Upload Error Report:

DEMO

Hands-On Exercise

Now you have an opportunity to practice the lessons learned today in a training environment.

Your instructor will provide direction on how to log in and complete the exercise.

If you have any questions, please ask your instructor.

Lesson Checkpoint

Now is your opportunity to check your understanding of the course material.

1. Employees can enroll in the "post-employment" benefits covered in this lesson through Employee Self Service.
   a) True
   b) False

2. What are the 3 Upload Error Reports involved in Post-Employment Benefits?

Lesson Summary

3	Benefit Plan Elections

In this lesson, you learned

- How the following Benefit Plan elections get submitted to Cardinal:

    - Health & FSA elections

    - Premium Reward

    - Retirement Plans

    - Deferred Compensation & Annuity

Lesson

| 4 | Benefit Summaries & Confirmation Statements |

This lesson covers the following topics:

- Overview of Benefit Summaries

- Overview of Confirmation Statements

Benefit Summary

The **Benefits Summary** page can be accessed from both the **Benefit Detail** and **Benefit Administrator** tiles.

Confirmation Statements

The Agency BA can view and print Confirmation Statements. Each Benefit Event creates a new Confirmation Statement.

When an employee performs Benefit Enrollments and/or submits a Life Event, the Agency BA can review the employee's Confirmation Statements.

- Confirmation Statements are created and run as batch jobs.
- The Agency BA has access to view/print their employees' Confirmation Statements.
- The Benefit Confirmation Statements list the participants' recent benefit elections and the per-pay-period costs.
- The participant submits a marked-up Confirmation Statement to the Agency BA for review if any changes are required. The Agency BA would update the enrollment to have a new statement generated.
- Federally mandated health benefit notice language is included in the printed Confirmation Statements.

Accessing Employee Benefit Statements

Viewing Benefit Statements by Event Date

A list of Benefit Statements are displayed by **Event Date**. The Agency BA selects the appropriate Confirmation Statement.

Navigation: Benefit Administrator Tile > Review Employee Benefits > Review Employee Statements

Back		Benefits Administrator		

Employee/Dependent Information

Security Officer III
Return to Select Employee

Person ID
Benefit Record 0

Enroll in Benefits

Review Employee Benefits

Current Benefits Summary

Savings Plans

Approve Document Upload

Review Employee Statements

Benefits Management

Review Employee Statements

Statement Type

5 rows

Event Date ⌄	Issue Date ⌄	Seq ⌄	Enrollment Event ⌄	Statement Type ⌄	
11/13/2020	11/13/2020 2:59:34PM	0	Event Maintenance	Submitted Enrollment	>
11/09/2020	11/09/2020 2:55:46PM	1	Event Maintenance	Submitted Enrollment	>
11/01/2020	11/09/2020 12:42:50PM	0	Event Maintenance	Submitted Enrollment	>
11/01/2020	11/06/2020 2:25:15PM	0	Event Maintenance	Submitted Enrollment	>
10/04/2020	10/04/2020 4:28:08PM	0	Event Maintenance	Submitted Enrollment	>

Printing Benefit Statement Selected

Click on the **Expand All** button to see the entire statement online. Click the **Print View** button to display a printable PDF version of the Confirmation Statement.

Email Notification Sent to Employee

DEMO

Hands-On Exercise

Now you have an opportunity to practice the lessons learned today in a training environment.

Your instructor will provide direction on how to log in and complete the exercise.

If you have any questions, please ask your instructor.

Lesson Checkpoint

Now is your opportunity to check your understanding of the course material.

? 1. Benefit Administrators are only able to see the most recent Confirmation Statement for each employee.
   a) True
   b) False

? 2. Benefit Administrators can create the Confirmation Statements.
   a) True
   b) False

Lesson Summary

4	Benefit Summaries & Confirmation Statements

In this lesson, you learned

- How to access and review Benefit Summaries

- How to access and review Confirmation Statements

Lesson

| 5 | QMCSO Administration |

This lesson covers the following topics:

- Overview on how to administer QMCSO

QMCSO Process Flow
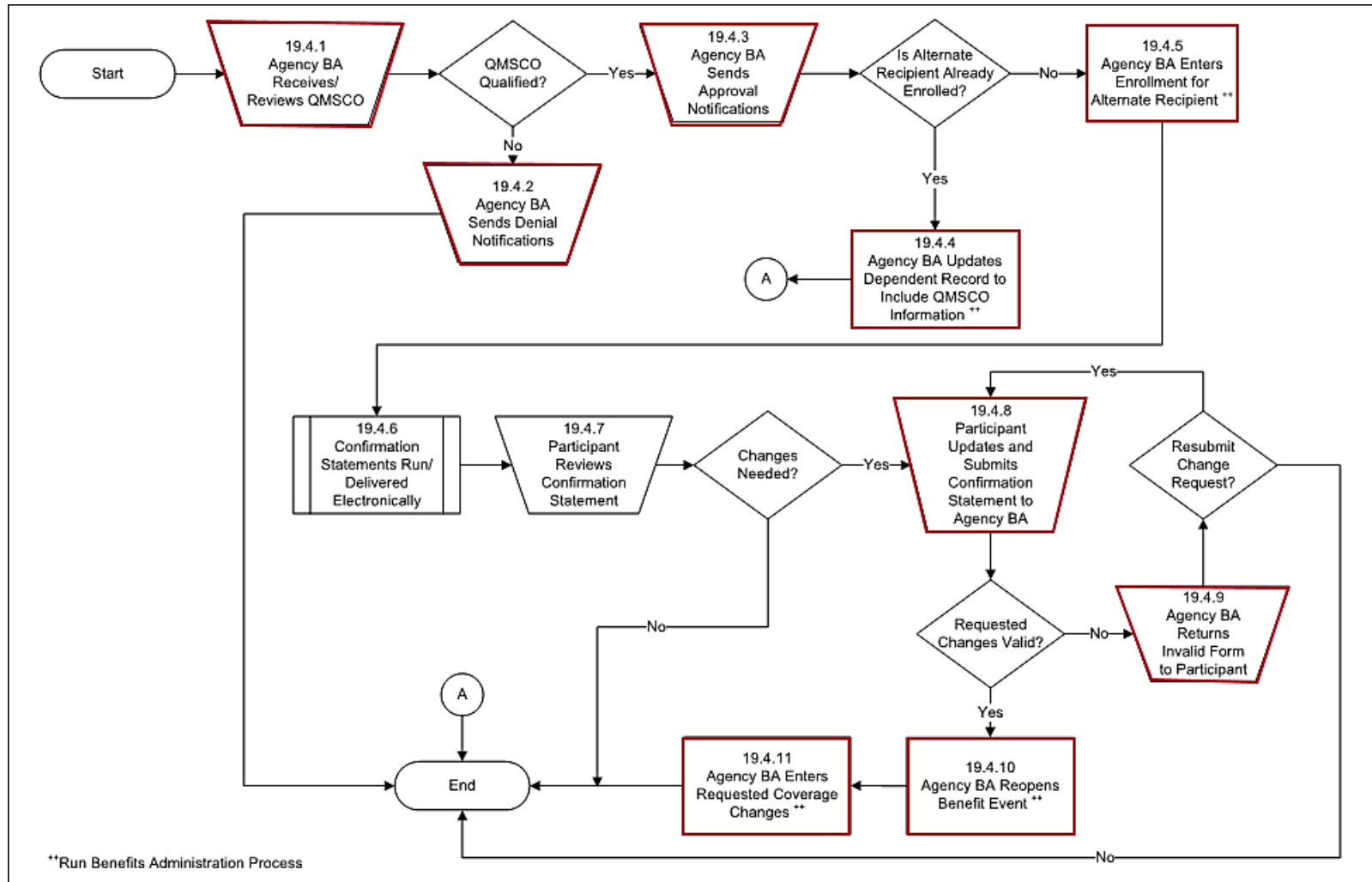
QMCSO Administration

A Qualified Medical Court Support Order (QMCSO) requires the employer group health plan to extend health coverage to a child of an eligible participant. A QMCSO can be in the form of either a Medical Child Support Order or a National Medical Support Notice (NMSN). The term QMCSO is used to represent both types throughout this presentation.

1. Agency BA receives and reviews QMCSO (outside of Cardinal)
   a. Notify participant
   b. Determines if QMCSO meets necessary legal requirements

2. Agency BA determines if employee is employed at the Agency
   a. Confirm (or deny) active employment through employee's **Job Record** page
   b. If employee is terminated, return process needs to be completed.

3. Agency BA confirms (or denies) child is currently listed as a dependent on employee's record.
   a. Add child as dependent if required

4. Agency BA determines if adding the coverage would violate FLSA
   a. Work with payroll to determine if required employee contribution to extend health coverage to child can be withheld from the participant's wages without violating applicable Federal and State limitations on withholding or withholding prioritization laws
   b. Notify Court or issuing Agency if withholding limits prevent withholding necessary employee contributions

Add QMCSO to corresponding Dependent Demonstration

The **Riders/Orders Exist** checkbox automatically populates after the **Riders/Orders** link is manually updated

<u>**Navigation**</u>: **Benefits Administrator Tile > On-Demand Event Maintenance Page > Election Entry > Dependent/Beneficiary tab > Change/Add Dependent Data > Personal Profile > Riders/Orders**

Note: The Agency BA must first add a Manual Event with the **BAS Action: MSA** to be able to add a QMCSO to a dependent. Then all changes to dependent/beneficiary data should be done through the **On-Demand Event Maintenance Page.**

Benefit Enrollment Change with QMCSO Demonstration

Select the applicable **Plan Type, Start Date**, and **Exception Type**. All other fields are optional.

QMCSO Administration (continued)

5. Send Denial/Approval Notifications (outside of Cardinal)
    a. Agency BA provides notification to court or issuing agency and participant that the QMCSO is (or is not) qualified
        i. Includes explanation of denial (e.g., defective or missing information)
    b. Court or issuing agency may submit new or revised QMCSO to Agency BA

6. Enter enrollments for the child
    a. Agency BA manually enters an online transaction into **Benefits Activity Table** via **On-Demand Event Maintenance** page to extend required health coverage to child

7. Update Dependent Record to include QMCSO information
    a. Agency BA inputs QMCSO information into child's Dependent Record if child is already enrolled under participant's coverage

8. Confirmation Statements automatically run and electronically delivered to participant
    a. Notification automatically sent for employee to review Confirmation Statements through ESS
    b. Participant submits marked-up Confirmation Statement to Agency BA if any changes required

Note: The Agency BA is the only role authorized to modify the QMCSO exception types in Cardinal.

DEMO

Hands-On Exercise

Now you have an opportunity to practice the lessons learned today in a training environment.

Your instructor will provide direction on how to log in and complete the exercise.

If you have any questions, please ask your instructor.

Lesson Checkpoint

Now is your opportunity to check your understanding of the course material. Read the question and make Note of your answer below.

1. A QMCSO event (MSA or MSR) can be established by a Job or Personal data change?
   a) True
   b) False

Lesson Summary

5	QMCSO Administration

In this lesson, you learned

- How to administer QMCSO

- How to add QMCSO to corresponding Dependent

- How to complete benefit enrollment changes for employee with valid QMCSO

Lesson

6	COBRA Administration

This lesson covers the following topics:

- How to administer COBRA

91

Administering COBRA and the COBRA Triggers

COBRA processing is centralized and handled by the Office of Health Benefits (OHB):
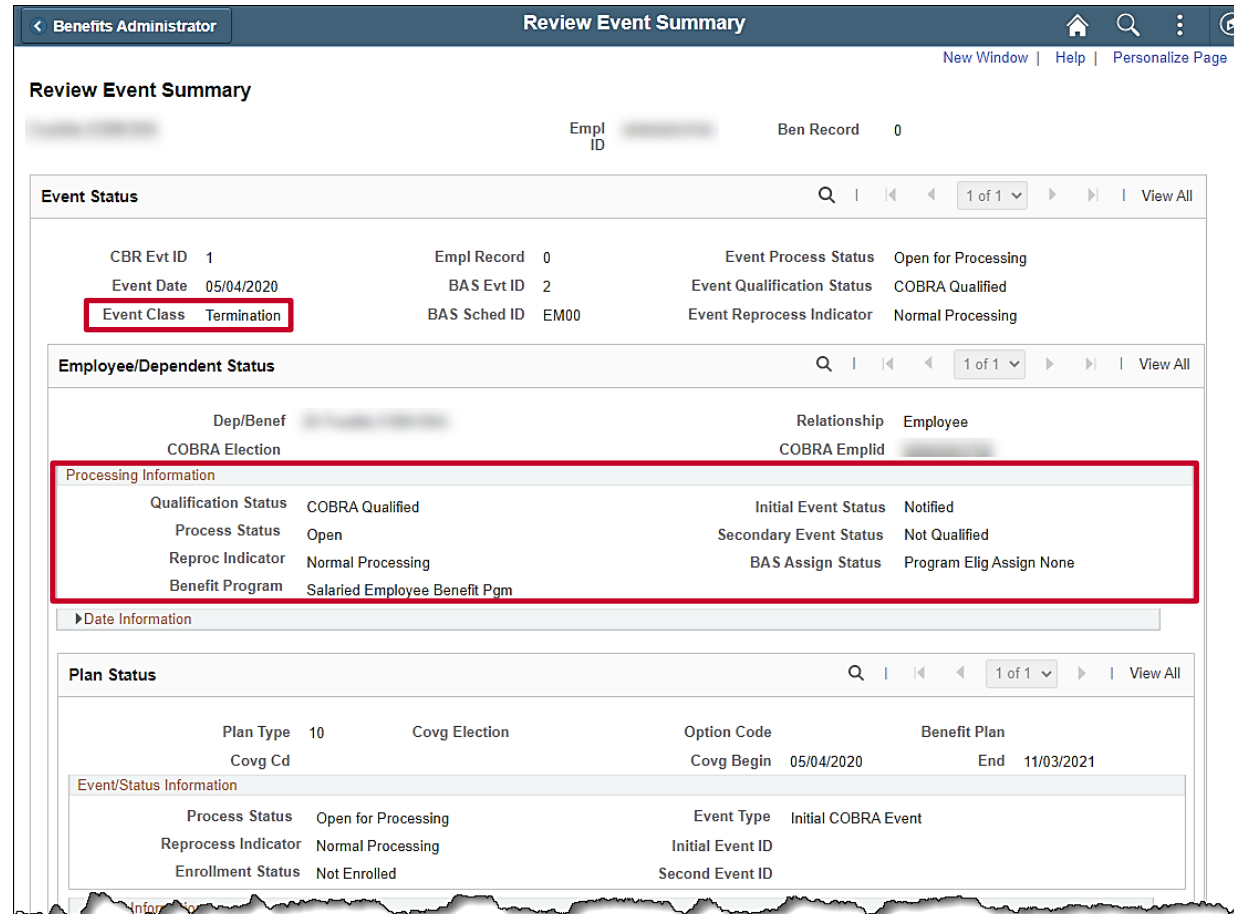
1. With the exception of COBRA General Notice distributed upon eligibility for Health coverage, Agencies no longer need to create and send COBRA notification letters upon COBRA events. OHB will also administer COBRA enrollment.

2. Agency BAs run and review Event Summary Report and COBRA Enrollment Report
   a. Event Summary Report lists all COBRA-eligible individuals with corresponding Event Status and Enrollment Status
   b. COBRA Enrollment Report displays COBRA enrollees' health coverage, dependent information, coverage begin date, and coverage end date

Through Job Transactions:
- Terminations
- Hour Reductions

Through Ben Admin Processing:
- Age 26 Dependent

Through Personal Data Changes:
- Marital Status Change

Through Manual Entry:
- Removing Dependents
- Waiving Coverage
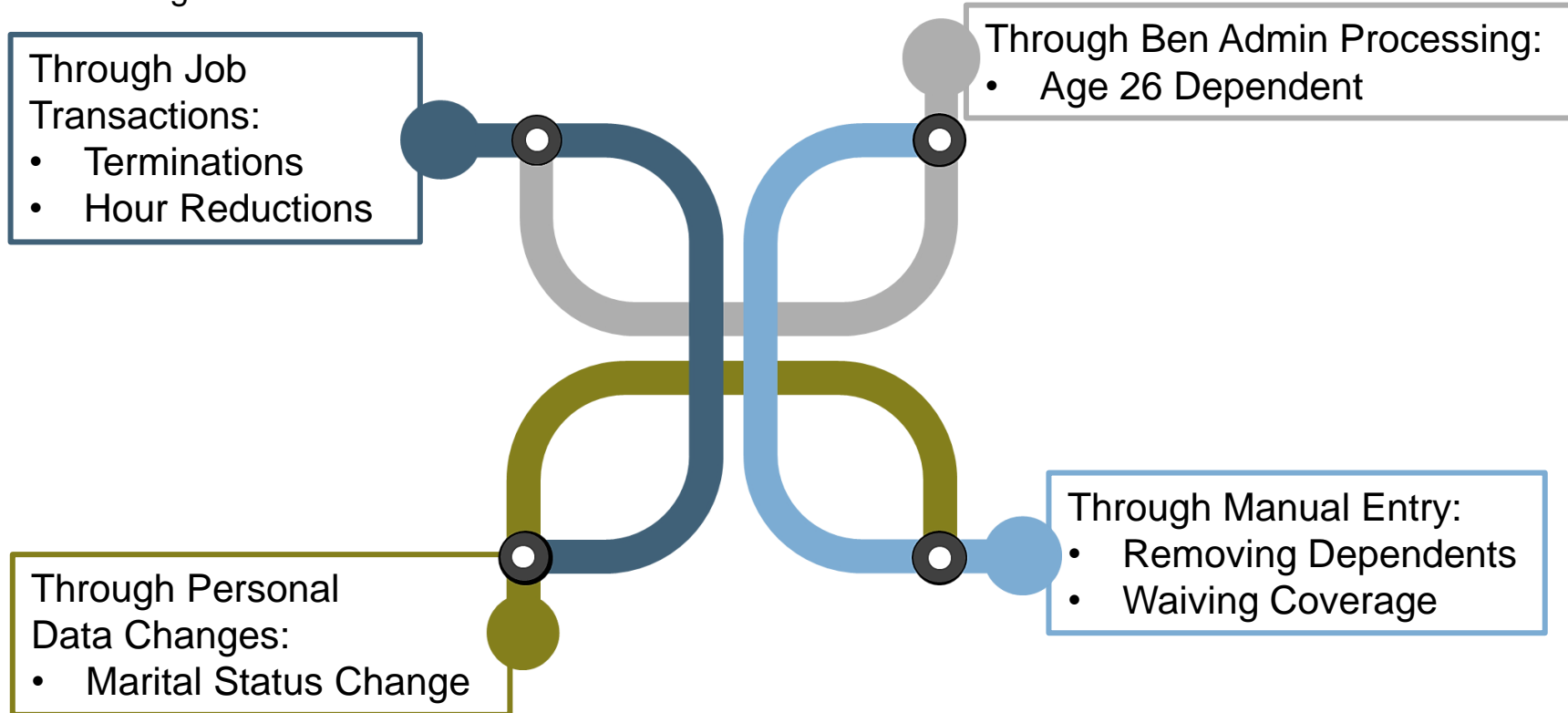
COBRA Review Event Summary Page

The **Event Class** field automatically triggers COBRA events. BAs have access to the COBRA Review Event Summary page for reference purposes to answer relevant COBRA questions.

Note: For further information on the **Review Event Summary** page, see the Job Aid titled **BN361 COBRA Review Event Summary Page.** This Job Aid can be found on the Cardinal Website in **Job Aids** under **Training**.

COBRA Enrollment Report Example

The COBRA Enrollment Report provides BAs with a consolidated list of all COBRA enrollees

Navigation: **Navigator > Administer COBRA Benefits > Review Processing Results > Enrollment Report**

```
Report ID: CBR006                          PeopleSoft                          Page No.  24
From Date: 01-JAN-2020              COBRA ENROLLMENT REPORT                     Run Date 12/22/2020
Thru Date: 31-DEC-2020                                                         Run Time 12:54:00
Benefit Program:    SPT


                  COBRA
            Empl  Event Dep                 Plan      Covrg Benefit              Coverage    Coverage    Coverage
Employee ID Rcd#  ID    ID   Participant Name  Type    Elect Plan    Coverage    Elect Date  Begin Date  End Date
----------------------------------------------------------------------------------------------------------------

            0     1     00                    10        E    CHA      EE+Spouse   10/29/2020  05/01/2020  10/31/2020
                        01

            0     1     00                    10        E    KP       Single      07/31/2020  07/01/2020  06/30/2023

    Benefit Program  SPT Total:     3
```

Lesson Checkpoint

Now is your opportunity to check your understanding of the course material. Read the question and make Note of your answer below.

1. In Cardinal, COBRA processing is centralized and handled by OHB.
    a) True
    b) False

2. Enrollment into COBRA can be performed through Employee Self-Service.
    a) True
    b) False

Lesson Summary

6	COBRA Administration

In this lesson, you learned

- How to administer COBRA

- The impacts associated with OHB now being the handler of COBRA processing

- How to review the COBRA enrollment report and employee statuses

Lesson

| 7 | Benefits Reconciliation |

This lesson covers the following topics:

- Health Benefit Reconciliation

- VRS Billing Reconciliation

Benefits Reconciliation

The Benefits Reconciliation business process involves steps to identify differences between the expected contributions and the amounts collected in Cardinal Payroll for both health benefits and VRS retirement.

The Benefits Reconciliation business process includes the following sub-processes:

- Health Benefit Reconciliation
- VRS Billing Reconciliation

Note: Benefit Reconciliation only applies to Payroll Agencies

Healthcare Reconciliation Process Flow
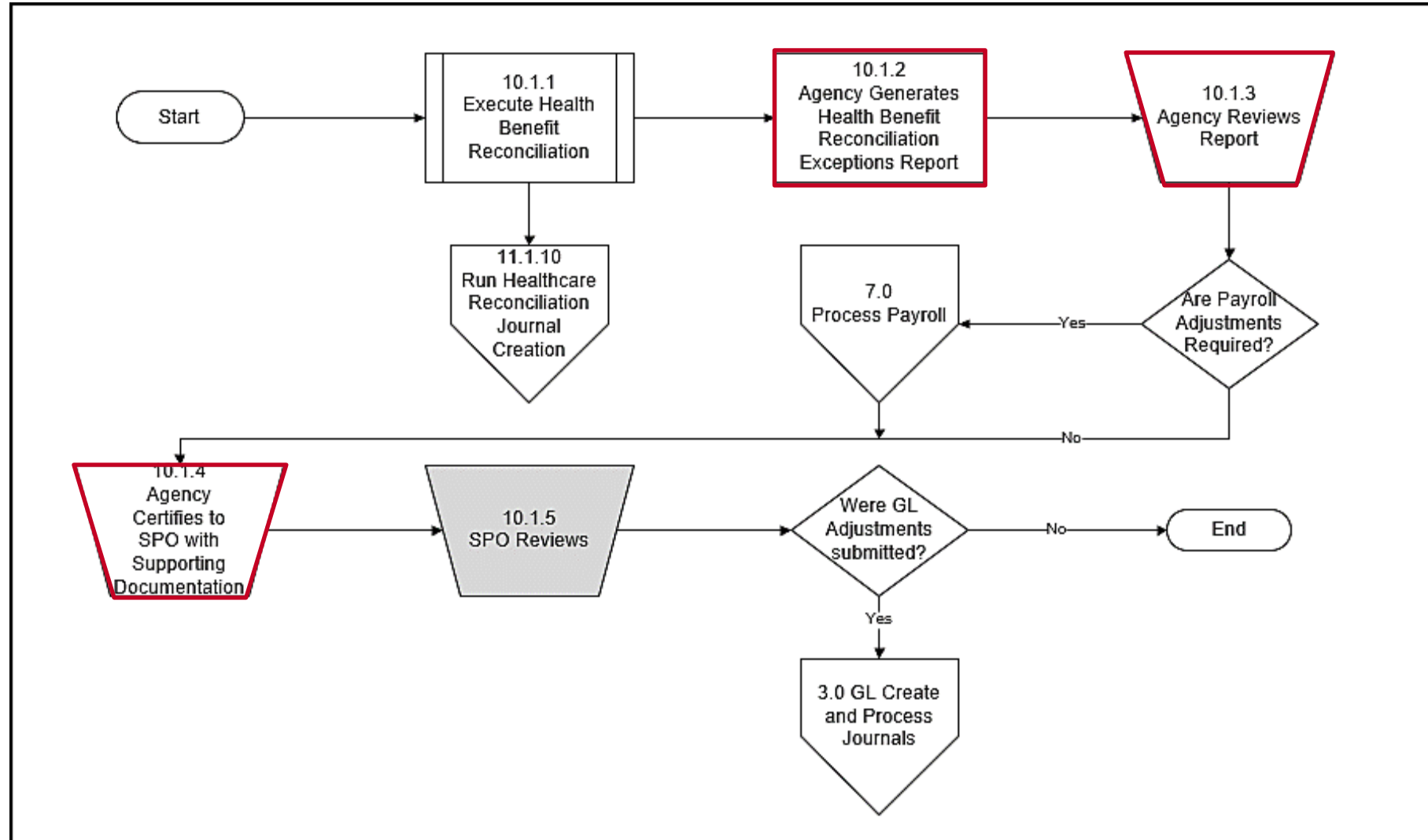
Health Benefit Reconciliation

The Health Benefit Reconciliation process automatically compares Cardinal effective dated health benefit enrollments with payroll deductions to determine and report variances in the health benefit premium. The process automatically generates General Ledger journals to refund overpayments and charge under collections to the agencies.

PPS runs the Health Benefit Reconciliation program monthly to identify differences between expected premiums (according to the health care plan enrollment) and premiums collected in Cardinal.

1. PPS executes Health Benefit Reconciliation process

2. Agency generates the Health Benefit Reconciliation Exceptions Report
   a. Agency designated personnel (i.e., benefits or payroll administrators) and SPO generate Health Benefit Reconciliation Exceptions Report (RHR070) monthly, after the payroll schedule posts
   b. Health Benefit Reconciliation Exceptions Report identifies variances between monthly payroll contributions and enrollment records (i.e., discrepancies between employee premiums, employer premiums, and total premiums)

Health Benefit Reconciliation (continued)

3. Agency reviews report
   a. Agency designated personnel required to review Health Benefit Reconciliation Exceptions Report
   b. Health Benefit Reconciliation program does not include retroactive adjustments for previous months
   c. Agency personnel identify required GL adjustments and contact SPO accordingly
   d. Agency BAs use Benefit Contribution Register to review employee and employer benefit contributions

4. Agency certifies to SPO with supporting documentation
   a. Agency Fiscal Officer certifies accuracy by signing Certification Form after all health benefit premium amount variances and employee premium reward variances are reviewed
   b. Signed Certification Form and supporting documentation submitted to SPO

5. SPO reviews with Agencies
   a. SPO reviews health care certification packet as they are received
   b. SPO Accountant verifies adjustments requested by agency payroll processors are accurate and GL Journal spreadsheet completed in accordance with published Cardinal Financials guidelines
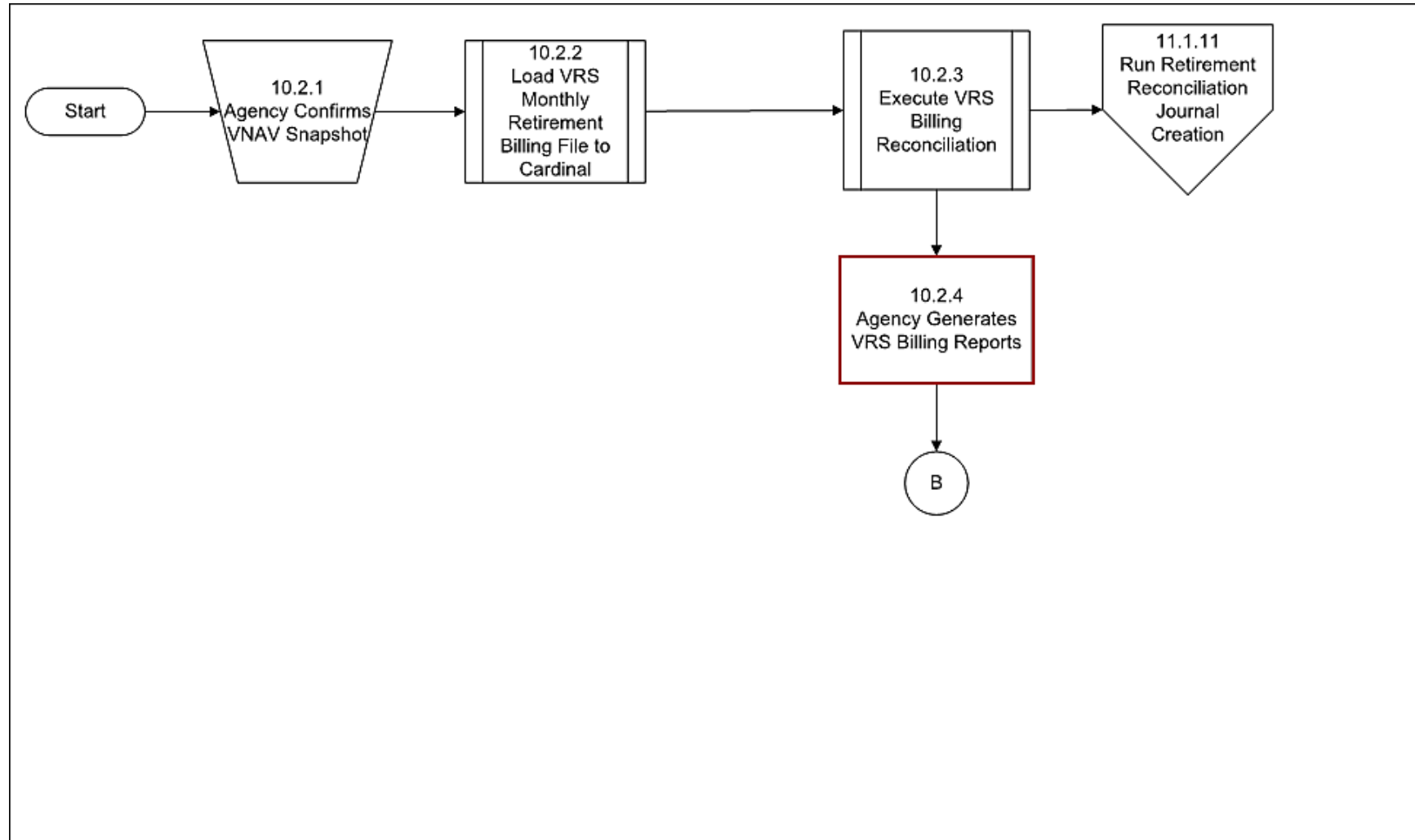
How to access the Health Benefit Reconciliation Exceptions Report

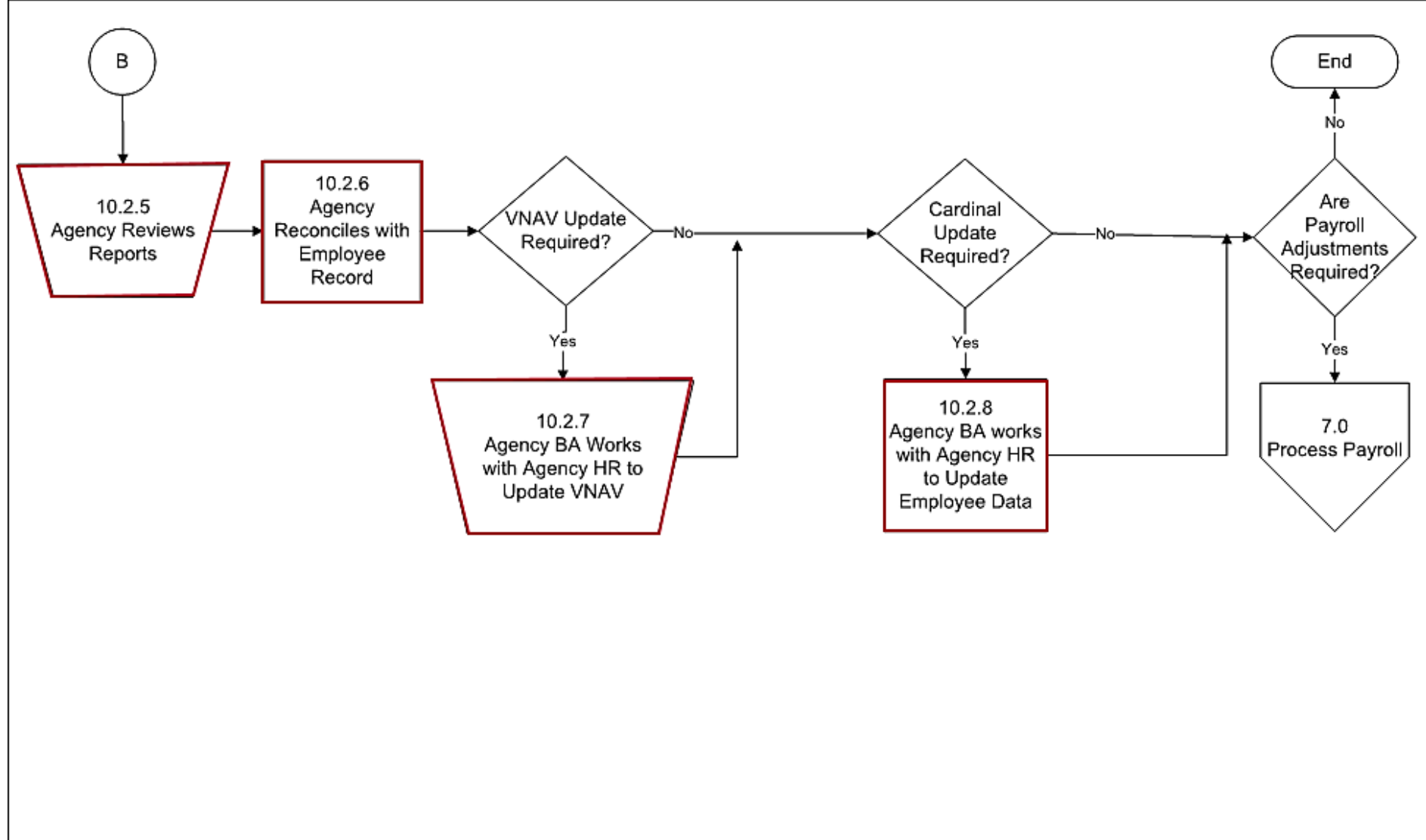**Navigation: Benefits > Reports > Health Benefit Recon Exception**
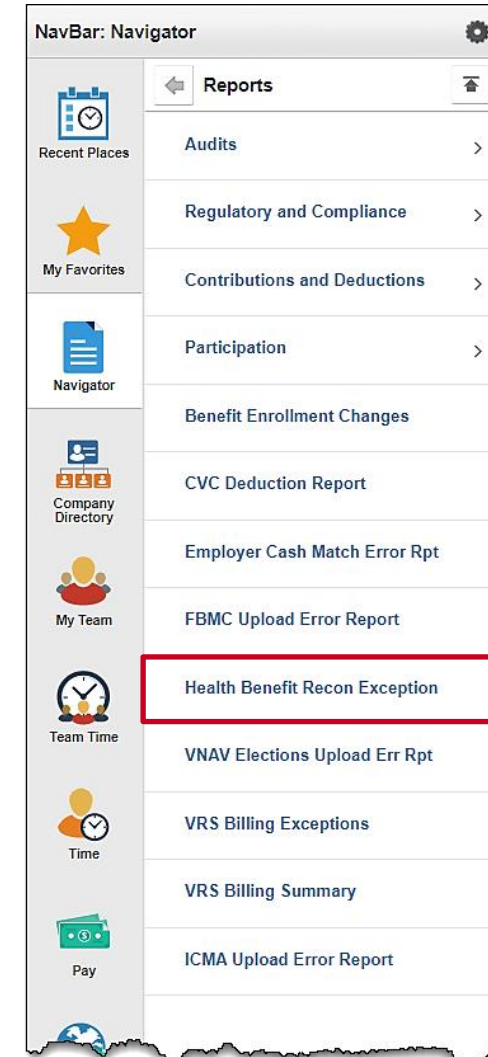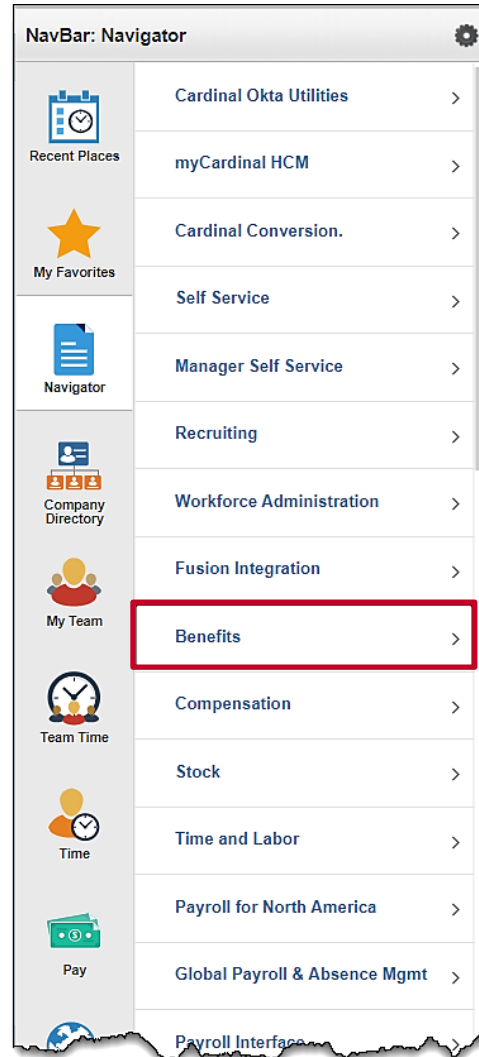
VRS Billing Reconciliation Process Flow

VRS Billing Reconciliation

The VRS Billing Reconciliation program runs monthly to compare the VRS retirement billing file with retirement deductions processed through Cardinal Payroll. The reconciliation identifies differences between the expected retirement contribution amounts according to employee retirement plan enrollments in VNAV and the retirement contributions actually collected through the combination of employee and employer deductions in Cardinal Payroll.

1. Agency confirms VNAV Snapshot
   a. Initial step to reconcile VRS benefits

2. PPS loads VRS Monthly Retirement Billing File to Cardinal
   a. Includes expected monthly contributions for prior calendar month, retirement plan codes, and total Agency contributions

3. PPS executes VRS Billing Reconciliation
   a. Cardinal automatically compares VRS Retirement Billing file employee data with deductions taken from employee's paycheck

Navigation: Benefits > Reports > VRS Billing Exceptions

VRS Billing Reconciliation (continued)

4. Agency generates VRS Billing Reports
   a. Agency payroll processors and SPO generate monthly VRS Billing Reports after SPO is notified VRS Billing Reconciliation is complete
   b. Reports include:
      i. VRS Billing Report contains all transactions (grouped by retirement plan and include totals by plan and entire report) from the VRS Billing Upload File to be processed by the VRS Billing Reconciliation program
      ii. VRS Billing Exceptions Report identifies variances (e.g., company number, retirement plan code, and amounts) between monthly Cardinal retirement contributions and the VNAV records
      iii. VRS Billing Summary Report recaps total retirement costs in VNAV, retirement contributions deducted in Cardinal Payroll, and differences between actual retirement costs and deducted retirement contributions

5. Agency reviews reports
   a. Agency payroll processors are required to review VRS Billing Reports, especially VRS Billing Exceptions Report
   b. The VRS Billing Reconciliation Program includes retroactive adjustments for previous months as corrections are made
      i. Corrections may be made directly in VNAV, eliminating need for adjusting journal entries or may require a Job Update that feeds into VNAV, depending on the nature of the discrepancy.

Generate and Review the VRS Billing Summary Demonstration

BAs can view and open reports after the **Run Status** field updates to "**Success**" and the **Distribution Status** field updates to "**Posted**"

Navigation: **Navigator > Benefits > Reports > VRS Billing Summary**

VRS Billing Reconciliation (continued)

6. Agency reconciles with Employee Record
   a. Agency BAs in conjunction with the Agency HR Administrator, make necessary adjustments to employee's retirement and/or savings plan enrollment if VRS Billing Exception Report indicates Cardinal does not match current record in VNAV
   b. Agency Payroll Processor works with the Agency BA to update Cardinal if an HR Administrator manually updates VNAV but fails to also update Cardinal

7. Agency Payroll Processor works with Agency HR to update VNAV

Lesson Checkpoint

Now is your opportunity to check your understanding of the course material. Read the question and make Note of your answer below.

1. Which of the following items below are included in the VRS Billing Report?

   A. Voluntary Hybrid Deductions

   C. Deferred Compensation Deductions

   B. Traditional Retirement Deductions

   D. Medical Premium Deductions

2. The Health Benefit Reconciliation process automatically generates General Ledger journals to refund overpayments and charge under collections to the agencies.
   a) True
   b) False

Lesson Summary

7	Benefits Reconciliation

In this lesson, you learned

- How to generate the Health Benefit Reconciliation Exceptions Report

- How to certify to SPO

- How to confirm a VNAV Snapshot

- How to generate and review the VRS Billing Reports

- How to reconcile errors from both Health Benefit and VRS Billing reports and update employee records if necessary

Lesson

| 8 | ACA Administration |

This lesson covers the following topics:

- Overview of ACA Reporting

ACA Reporting Process Flow
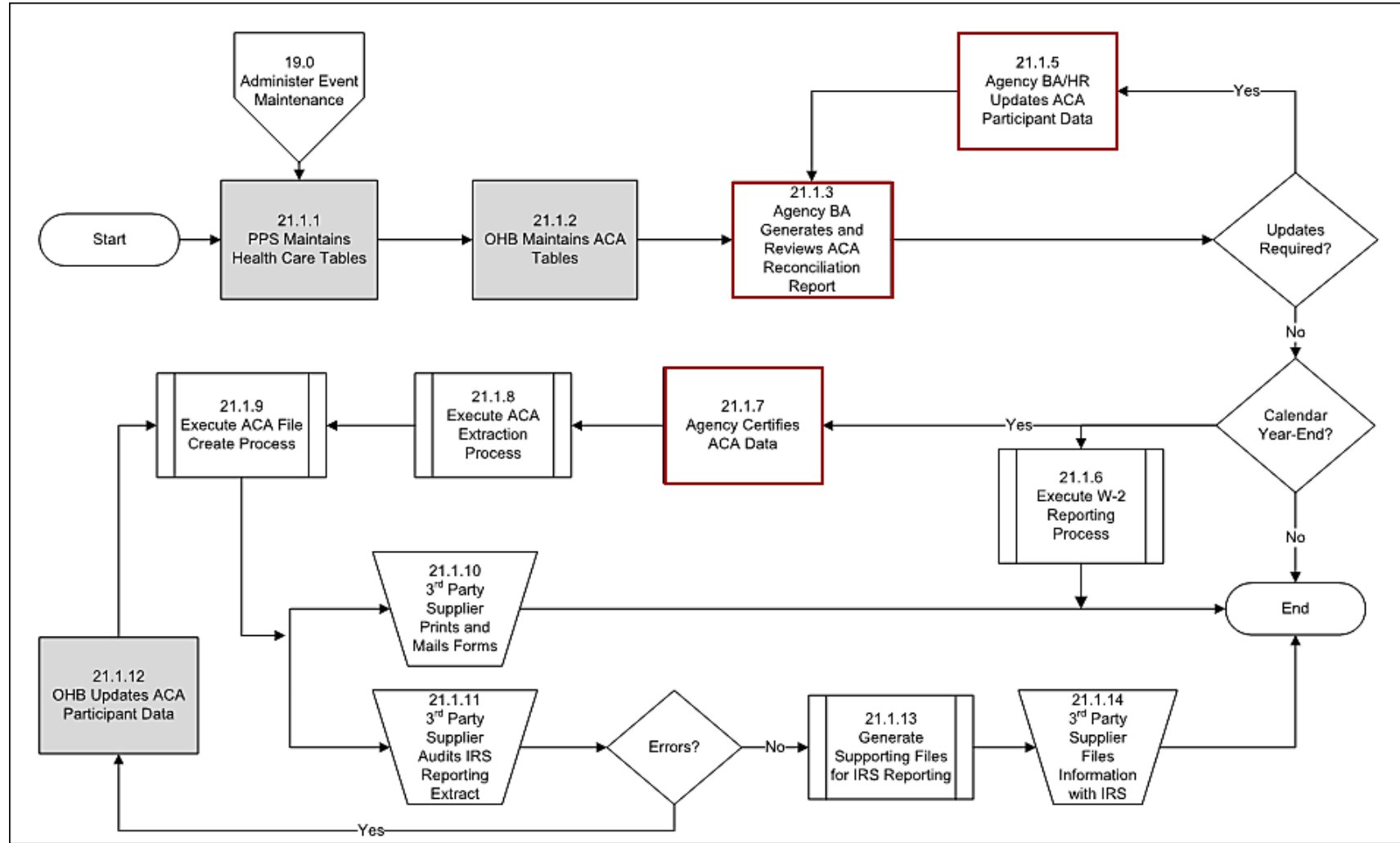
Manage ACA Reporting

The **ACA Reporting** business process involves capturing the data elements required to create annual regulatory forms for health benefit participants and annual regulatory reporting to the Internal Revenue Service (IRS). The **ACA employee eligibility** page is systematically established based on enrollment, but occasionally needs to be manually established for an employee.

1. Agency BA creates ACA Excel Files and reviews ACA Reconciliation Report
    a. Agency BA runs **ACA Reconciliation Report** as comma separated values (csv) file
    b. Individual Agencies run ACA Reconciliation
        i. Delineates employment and enrollment statuses of each participant and dependent
        ii. Contains separate line per individual, notating statuses by month during the calendar year
    c. Run and reviewed at any point
    d. Suggesting the report runs on a monthly basis

2. Agency BA/HR updates ACA participant data
    a. Agency BA works with Agency to establish required records to invoke a Benefits Event

3. Agency BA certifies ACA data
    a. Agency enters employer data online using **ACA Data Entry** page

Note: The healthcare premium value is reported on the W-2, in box 12 with a code of DD. This process which is outside of ACA Reconciliation is totally handled by PPS. (Only for Payroll Agencies)

ACA Employee Eligibility Page

Employees will only be picked up by the ACA Process if they have an eligible record.

Note: On the hire date of the employee, they will get a new row with the status of **Eligible.** On the date the benefits will be effective, the employee will get an added row with a status of **Always Eligible.** If the employee is hired on the first of the month, they will only have one status row of **Always Eligible.** If the employee is not eligible for health insurance, the status is **Ineligible.**

Lesson Checkpoint

Now is your opportunity to check your understanding of the course material. Read the question and make Note of your answer below.

1. An employee will only get picked up by the ACA Process if he/she has a record set up on the ACA Employee Eligibility page.
   a) True
   b) False

2. How often should the ACA Reconciliation Report be run by Agency BAs?
   a) Monthly
   b) Weekly
   c) Daily
   d) Yearly

Lesson Summary

8	ACA Administration

In this lesson, you learned

- An overview ACA Reporting

- How to generate, review and certify the ACA Data

Course Summary

BN361	Cardinal Employee Benefit Enrollment and Maintenance

In this course, you learned

- An overview of Cardinal Benefits Basics

- How to use the On-Demand Event Maintenance Page to work with Benefit Events

- The Benefit Plan elections in Cardinal and how to conduct manual updates to Benefit Events

- An overview of Benefit Summaries & Confirmation Statements

- How to administer QMCSO

- How to administer COBRA

- How to track and manage Benefits Reconciliations

- How to administer ACA Reporting

How to Complete Course Evaluations

The following steps can be used to complete course evaluations at the end of an ILT or VILT training session. **Please note that it may take a couple of hours after the completion of your course for evaluations to be available**.

1. Navigate to the Cardinal Learning Homepage.

2. Enter your username in the **Username** field.

3. Enter your password in the **Password** field.

4. Click the red **Log In** button.

How to Complete Course Evaluations (Continued)

5. The **Cardinal Learning Homepage** displays.

How to Complete Course Evaluations (Continued)

6. Hover over the **Learning** tab in the **Global Navigation** bar.

7. In the displayed dropdown menu, click **View Your Transcript**.

How to Complete Course Evaluations (Continued)

8. Your **Transcript** page displays.

9. Hover over the **Active** tab.

10. In the displayed dropdown, click **Completed.**

How to Complete Course Evaluations (Continued)

11. Your **Transcript** page refreshes.

12. Hover over the **View Certificate** button for the completed course.

13. In the displayed dropdown, click **Evaluate.**

How to Complete Course Evaluations (Continued)

14. A course evaluation notification displays.

15. Click **Continue.**

16. The course evaluation displays.

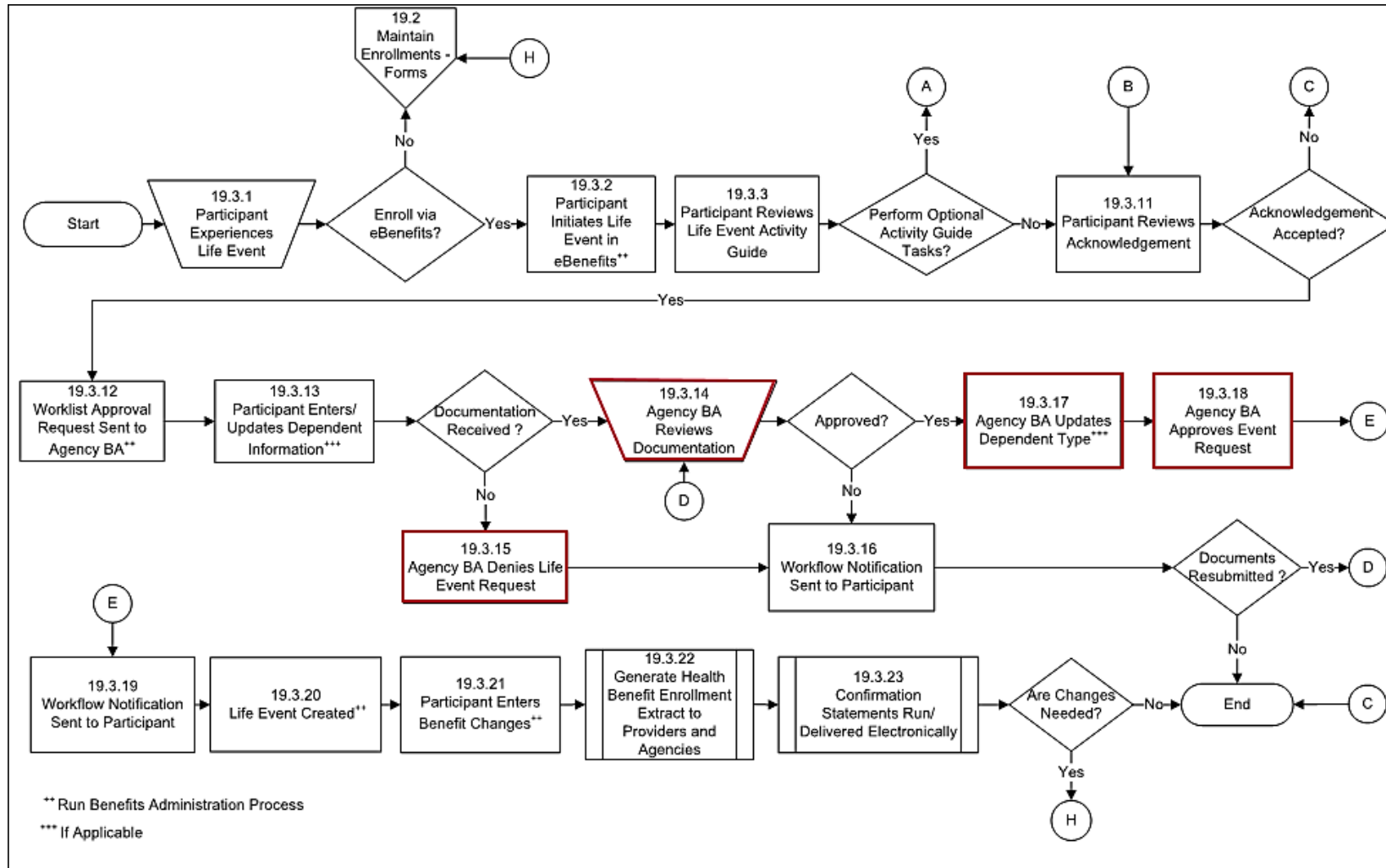17. Complete and submit the course evaluation.

Appendix

- Life Events Overview

- Open Enrollment Overview
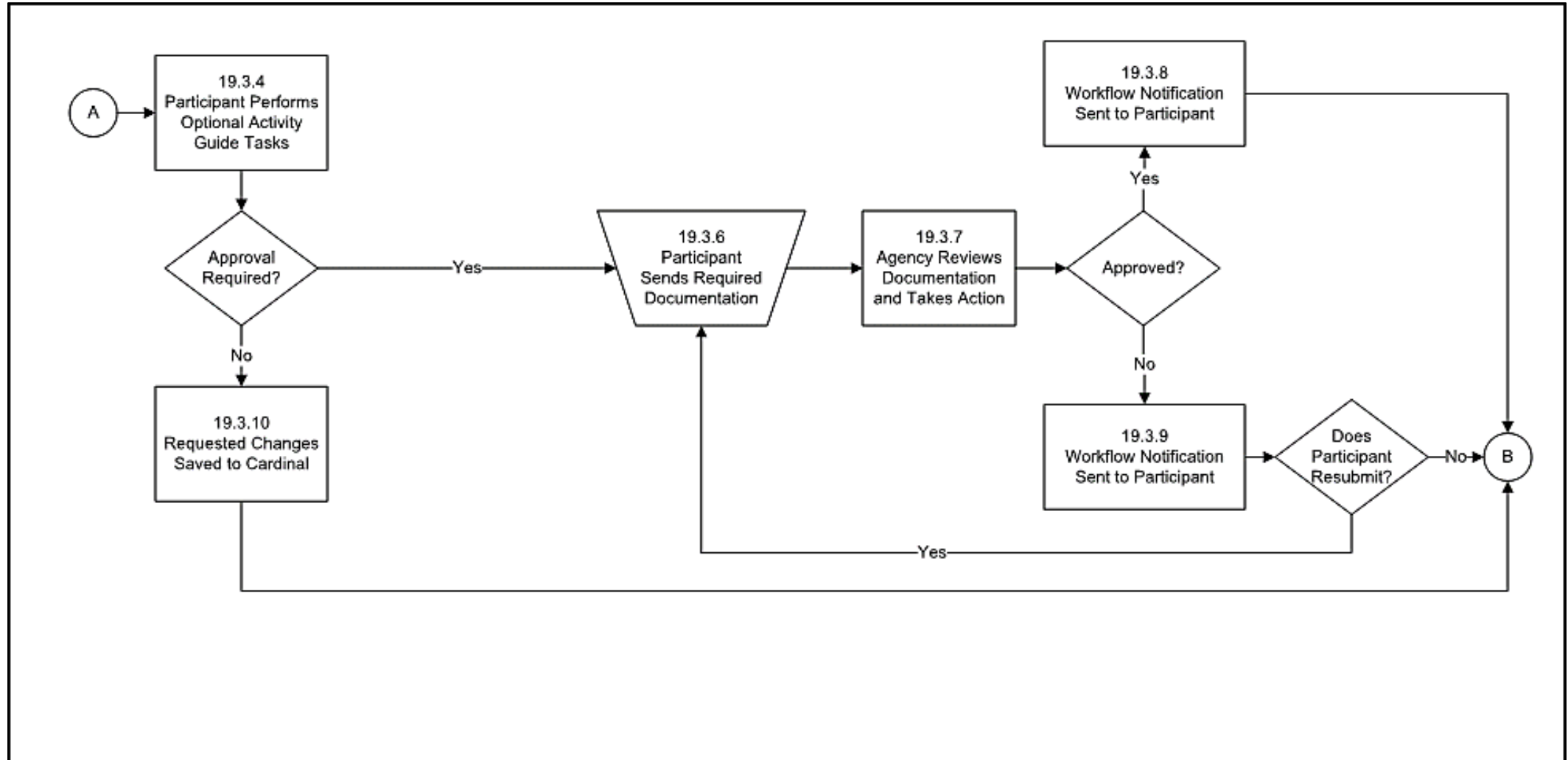
- Flowchart Key

124

Life Events Process Flow

Life Events Process Flow (continued)

Administering Open Enrollment

The **Administer Open Enrollment** business process is composed of the tasks performed by OHB and the Cardinal Post Production Support (PPS) in advance of each enrollment period. These tasks include the configuration and maintenance of tables containing benefits plan attributes.

The **Administer Open Enrollment** business process includes the **Manage Open Enrollment** sub-process

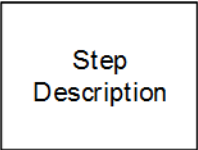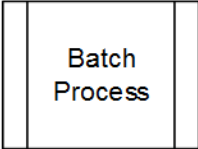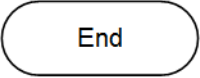# Administer Open Enrollment Process Flow
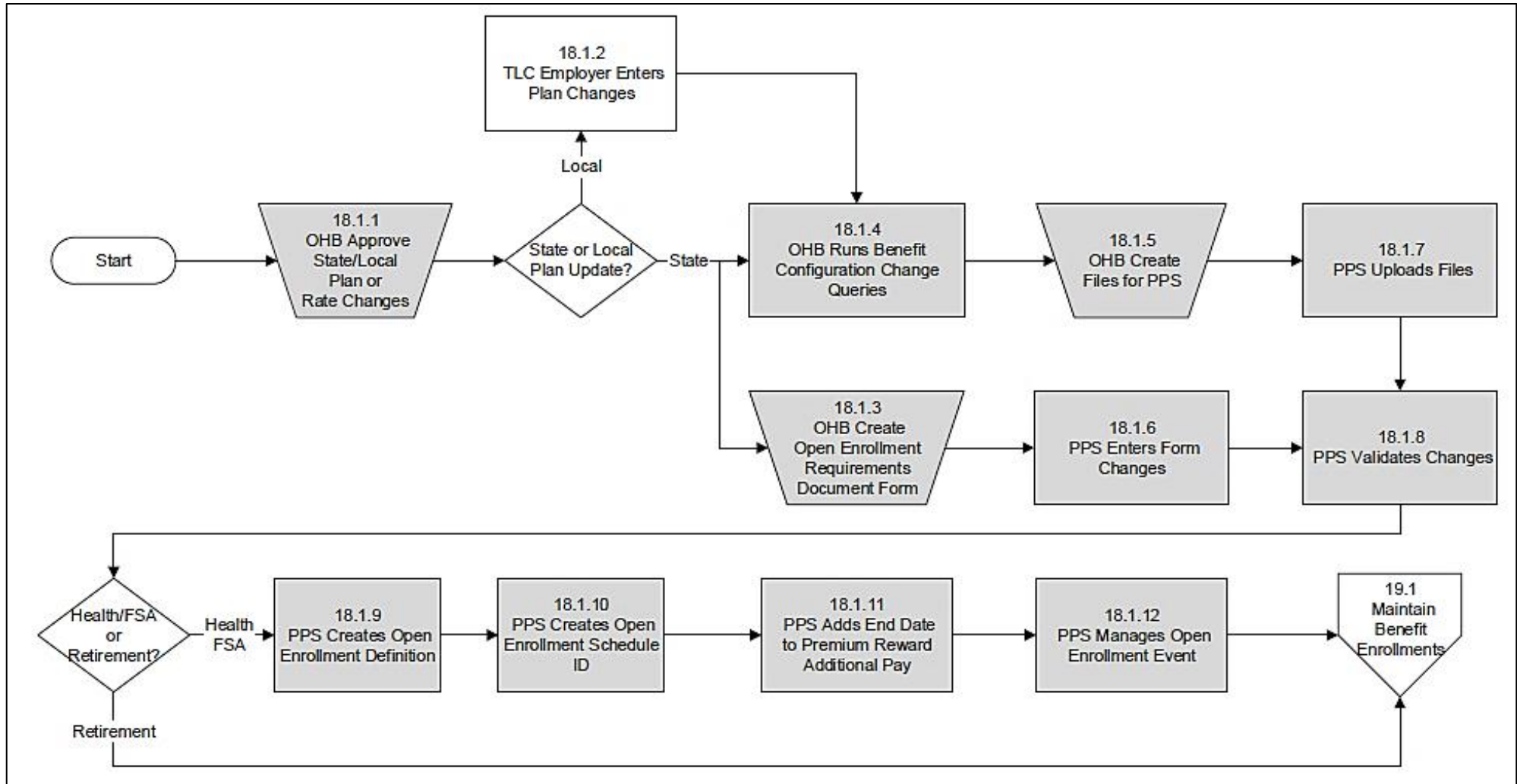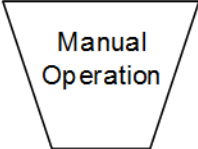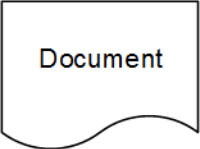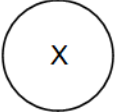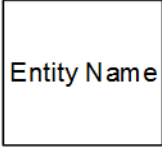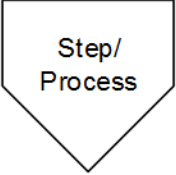
Manage Open Enrollment

- BAs can run the Defaulted OE Election Report (RBN009) to identify those employees who didn't take action during the Open Enrollment period. Those employees will therefore be automatically enrolled in a plan.
  - If a plan is available now, and won't be available next year, it will automatically move those employees to the new plan. Those employees get automatically defaulted into the new plan if they don't make an election.

- During OE the Dependent Approval Report (RBN301) will identify any unapproved dependents.
  - During OE, this report should be run daily to keep up with the volume of reviews and subsequent actions.
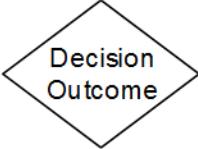
- The Benefit Event Status Report (RBN300) provides a list of events and their specific statuses.

Flowchart Key

Symbol	Description	Symbol	Description
Step Description	Depicts a process step or interface.	Start	Indicates point at which the process begins. Does not represent any activity.
Batch Process	Specifies a batch process.	End	Indicates point at which the process ends. Does not represent any activity.
Manual Operation	Depicts a process step that is preformed manually.	Document	Depicts a document of any kind, either electronic or hard copy.
Decision Outcome	Defines the possible outcomes of a decision or analysis that took place in a step immediately preceding.	X	Indicates an on-page or intra process connector. Used to avoid complex overlapping connector lines or to continue a process on a subsequent page.
Entity Name	Represents an entity (person, organization, etc.).	Step/ Process	Connects steps between business processes.